

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$36,603,282	\$53,518,078	\$16,914,796	46%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$53,313,528	\$60,038,935	\$6,725,407	13%
4	Current Assets Whose Use is Limited for Current Liabilities	\$1,273,013	\$900,896	(\$372,117)	-29%
5	Due From Affiliates	\$6,177,652	\$8,994,093	\$2,816,441	46%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$8,853,966	\$9,333,372	\$479,406	5%
8	Prepaid Expenses	\$9,816,103	\$9,603,409	(\$212,694)	-2%
9	Other Current Assets	\$0	\$0	\$0	0%
	Total Current Assets	\$116,037,544	\$142,388,783	\$26,351,239	23%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$151,523,870	\$173,599,412	\$22,075,542	15%
	Total Noncurrent Assets Whose Use is Limited:	\$151,523,870	\$173,599,412	\$22,075,542	15%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$227,259,186	\$215,660,594	(\$11,598,592)	-5%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$492,540,194	\$526,112,141	\$33,571,947	7%
2	Less: Accumulated Depreciation	\$299,833,683	\$322,977,997	\$23,144,314	8%
	Property, Plant and Equipment, Net	\$192,706,511	\$203,134,144	\$10,427,633	5%
3	Construction in Progress	\$27,578,848	\$39,100,951	\$11,522,103	42%
	Total Net Fixed Assets	\$220,285,359	\$242,235,095	\$21,949,736	10%
	Total Assets	\$715,105,959	\$773,883,884	\$58,777,925	8%

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		FY 2011	FY 2012	AMOUNT	%
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II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$27,356,488	\$25,493,612	(\$1,862,876)	-7%
2	Salaries, Wages and Payroll Taxes	\$12,263,559	\$20,868,119	\$8,604,560	70%
3	Due To Third Party Payers	\$11,107,547	\$9,985,351	(\$1,122,196)	-10%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$2,515,000	\$1,555,000	(\$960,000)	-38%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$5,874,479	\$5,178,467	(\$696,012)	-12%
	Total Current Liabilities	\$59,117,073	\$63,080,549	\$3,963,476	7%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$252,100,000	\$249,580,000	(\$2,520,000)	-1%
	Total Long Term Debt	\$252,100,000	\$249,580,000	(\$2,520,000)	-1%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$15,647,308	\$16,602,236	\$954,928	6%
	Total Long Term Liabilities	\$267,747,308	\$266,182,236	(\$1,565,072)	-1%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$332,255,763	\$386,002,265	\$53,746,502	16%
2	Temporarily Restricted Net Assets	\$27,787,449	\$29,794,088	\$2,006,639	7%
3	Permanently Restricted Net Assets	\$28,198,366	\$28,824,746	\$626,380	2%
	Total Net Assets	\$388,241,578	\$444,621,099	\$56,379,521	15%
	Total Liabilities and Net Assets	\$715,105,959	\$773,883,884	\$58,777,925	8%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,113,153,089	\$1,177,078,060	\$63,924,971	6%
2	Less: Allowances	\$604,072,976	\$641,272,278	\$37,199,302	6%
3	Less: Charity Care	\$11,359,623	\$13,969,782	\$2,610,159	23%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$497,720,490	\$521,836,000	\$24,115,510	5%
5	Other Operating Revenue	\$13,930,894	\$22,126,583	\$8,195,689	59%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$511,651,384	\$543,962,583	\$32,311,199	6%
B. Operating Expenses:					
1	Salaries and Wages	\$194,262,671	\$191,500,660	(\$2,762,011)	-1%
2	Fringe Benefits	\$67,466,263	\$66,126,946	(\$1,339,317)	-2%
3	Physicians Fees	\$45,908,952	\$55,286,603	\$9,377,651	20%
4	Supplies and Drugs	\$71,592,342	\$71,979,213	\$386,871	1%
5	Depreciation and Amortization	\$27,369,949	\$31,663,499	\$4,293,550	16%
6	Bad Debts	\$18,183,085	\$19,413,218	\$1,230,133	7%
7	Interest	\$4,587,742	\$4,156,056	(\$431,686)	-9%
8	Malpractice	\$6,373,521	\$6,798,516	\$424,995	7%
9	Other Operating Expenses	\$59,727,443	\$67,872,485	\$8,145,042	14%
	Total Operating Expenses	\$495,471,968	\$514,797,196	\$19,325,228	4%
	Income/(Loss) From Operations	\$16,179,416	\$29,165,387	\$12,985,971	80%
C. Non-Operating Revenue:					
1	Income from Investments	\$7,435,069	\$21,639,149	\$14,204,080	191%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$71,435	\$2,571,725	\$2,500,290	3500%
	Total Non-Operating Revenue	\$7,506,504	\$24,210,874	\$16,704,370	223%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$23,685,920	\$53,376,261	\$29,690,341	125%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$23,685,920	\$53,376,261	\$29,690,341	125%
	Principal Payments	\$35,125,000	\$43,360,000	\$8,235,000	23%

**DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$268,150,184	\$257,261,386	(\$10,888,798)	-4%
2	MEDICARE MANAGED CARE	\$23,714,332	\$29,619,519	\$5,905,187	25%
3	MEDICAID	\$41,817,164	\$67,345,114	\$25,527,950	61%
4	MEDICAID MANAGED CARE	\$18,059,075	\$5,395,221	(\$12,663,854)	-70%
5	CHAMPUS/TRICARE	\$632,468	\$494,495	(\$137,973)	-22%
6	COMMERCIAL INSURANCE	\$89,264,881	\$82,742,019	(\$6,522,862)	-7%
7	NON-GOVERNMENT MANAGED CARE	\$92,528,372	\$90,329,985	(\$2,198,387)	-2%
8	WORKER'S COMPENSATION	\$3,174,286	\$3,664,659	\$490,373	15%
9	SELF- PAY/UNINSURED	\$5,413,243	\$6,349,011	\$935,768	17%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,572,425	\$799,376	(\$773,049)	-49%
	TOTAL INPATIENT GROSS REVENUE	\$544,326,430	\$544,000,785	(\$325,645)	0%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$179,546,972	\$197,024,655	\$17,477,683	10%
2	MEDICARE MANAGED CARE	\$18,545,125	\$24,831,238	\$6,286,113	34%
3	MEDICAID	\$31,127,438	\$62,332,606	\$31,205,168	100%
4	MEDICAID MANAGED CARE	\$34,948,400	\$8,800,766	(\$26,147,634)	-75%
5	CHAMPUS/TRICARE	\$696,661	\$987,989	\$291,328	42%
6	COMMERCIAL INSURANCE	\$144,511,445	\$151,844,482	\$7,333,037	5%
7	NON-GOVERNMENT MANAGED CARE	\$131,344,234	\$150,929,028	\$19,584,794	15%
8	WORKER'S COMPENSATION	\$4,038,224	\$5,002,982	\$964,758	24%
9	SELF- PAY/UNINSURED	\$22,935,833	\$30,198,901	\$7,263,068	32%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,132,327	\$1,124,628	(\$7,699)	-1%
	TOTAL OUTPATIENT GROSS REVENUE	\$568,826,659	\$633,077,275	\$64,250,616	11%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$447,697,156	\$454,286,041	\$6,588,885	1%
2	MEDICARE MANAGED CARE	\$42,259,457	\$54,450,757	\$12,191,300	29%
3	MEDICAID	\$72,944,602	\$129,677,720	\$56,733,118	78%
4	MEDICAID MANAGED CARE	\$53,007,475	\$14,195,987	(\$38,811,488)	-73%
5	CHAMPUS/TRICARE	\$1,329,129	\$1,482,484	\$153,355	12%
6	COMMERCIAL INSURANCE	\$233,776,326	\$234,586,501	\$810,175	0%
7	NON-GOVERNMENT MANAGED CARE	\$223,872,606	\$241,259,013	\$17,386,407	8%
8	WORKER'S COMPENSATION	\$7,212,510	\$8,667,641	\$1,455,131	20%
9	SELF- PAY/UNINSURED	\$28,349,076	\$36,547,912	\$8,198,836	29%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$2,704,752	\$1,924,004	(\$780,748)	-29%
	TOTAL GROSS REVENUE	\$1,113,153,089	\$1,177,078,060	\$63,924,971	6%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$91,658,965	\$86,964,011	(\$4,694,954)	-5%
2	MEDICARE MANAGED CARE	\$7,290,698	\$9,284,752	\$1,994,054	27%
3	MEDICAID	\$9,986,029	\$17,439,366	\$7,453,337	75%
4	MEDICAID MANAGED CARE	\$4,465,320	\$684,900	(\$3,780,420)	-85%
5	CHAMPUS/TRICARE	\$199,476	\$158,895	(\$40,581)	-20%
6	COMMERCIAL INSURANCE	\$55,263,947	\$47,902,443	(\$7,361,504)	-13%
7	NON-GOVERNMENT MANAGED CARE	\$54,551,869	\$56,299,653	\$1,747,784	3%
8	WORKER'S COMPENSATION	\$2,183,782	\$2,521,139	\$337,357	15%
9	SELF- PAY/UNINSURED	\$613,179	\$1,343,992	\$730,813	119%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$286,024	\$230,040	(\$55,984)	-20%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$226,499,289	\$222,829,191	(\$3,670,098)	-2%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$61,372,658	\$66,601,733	\$5,229,075	9%
2	MEDICARE MANAGED CARE	\$5,701,485	\$7,783,782	\$2,082,297	37%
3	MEDICAID	\$7,534,470	\$16,105,372	\$8,570,902	114%
4	MEDICAID MANAGED CARE	\$8,641,406	\$1,135,195	(\$7,506,211)	-87%
5	CHAMPUS/TRICARE	\$162,850	\$207,161	\$44,311	27%
6	COMMERCIAL INSURANCE	\$88,667,757	\$92,848,271	\$4,180,514	5%
7	NON-GOVERNMENT MANAGED CARE	\$77,369,210	\$89,591,228	\$12,222,018	16%
8	WORKER'S COMPENSATION	\$2,778,137	\$3,441,075	\$662,938	24%
9	SELF- PAY/UNINSURED	\$2,598,031	\$6,392,663	\$3,794,632	146%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$284,556	\$295,665	\$11,109	4%
	TOTAL OUTPATIENT NET REVENUE	\$255,110,560	\$284,402,145	\$29,291,585	11%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$153,031,623	\$153,565,744	\$534,121	0%
2	MEDICARE MANAGED CARE	\$12,992,183	\$17,068,534	\$4,076,351	31%
3	MEDICAID	\$17,520,499	\$33,544,738	\$16,024,239	91%
4	MEDICAID MANAGED CARE	\$13,106,726	\$1,820,095	(\$11,286,631)	-86%
5	CHAMPUS/TRICARE	\$362,326	\$366,056	\$3,730	1%
6	COMMERCIAL INSURANCE	\$143,931,704	\$140,750,714	(\$3,180,990)	-2%
7	NON-GOVERNMENT MANAGED CARE	\$131,921,079	\$145,890,881	\$13,969,802	11%
8	WORKER'S COMPENSATION	\$4,961,919	\$5,962,214	\$1,000,295	20%
9	SELF- PAY/UNINSURED	\$3,211,210	\$7,736,655	\$4,525,445	141%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$570,580	\$525,705	(\$44,875)	-8%
	TOTAL NET REVENUE	\$481,609,849	\$507,231,336	\$25,621,487	5%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	8,759	7,876	(883)	-10%
2	MEDICARE MANAGED CARE	736	860	124	17%
3	MEDICAID	1,907	3,051	1,144	60%
4	MEDICAID MANAGED CARE	1,162	275	(887)	-76%
5	CHAMPUS/TRICARE	34	34	0	0%
6	COMMERCIAL INSURANCE	3,829	3,144	(685)	-18%
7	NON-GOVERNMENT MANAGED CARE	3,908	4,088	180	5%
8	WORKER'S COMPENSATION	83	92	9	11%
9	SELF- PAY/UNINSURED	248	197	(51)	-21%
10	SAGA	0	0	0	0%
11	OTHER	97	51	(46)	-47%
	TOTAL DISCHARGES	20,763	19,668	(1,095)	-5%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	48,752	44,205	(4,547)	-9%
2	MEDICARE MANAGED CARE	3,997	4,389	392	10%
3	MEDICAID	8,838	14,079	5,241	59%
4	MEDICAID MANAGED CARE	4,051	1,119	(2,932)	-72%
5	CHAMPUS/TRICARE	97	102	5	5%
6	COMMERCIAL INSURANCE	14,073	12,728	(1,345)	-10%
7	NON-GOVERNMENT MANAGED CARE	15,104	14,068	(1,036)	-7%
8	WORKER'S COMPENSATION	254	317	63	25%
9	SELF- PAY/UNINSURED	960	751	(209)	-22%
10	SAGA	0	0	0	0%
11	OTHER	537	252	(285)	-53%
	TOTAL PATIENT DAYS	96,663	92,010	(4,653)	-5%
C.	OUTPATIENT VISITS				

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	MEDICARE TRADITIONAL	51,641	53,584	1,943	4%
2	MEDICARE MANAGED CARE	5,060	6,695	1,635	32%
3	MEDICAID	11,668	31,387	19,719	169%
4	MEDICAID MANAGED CARE	22,441	4,820	(17,621)	-79%
5	CHAMPUS/TRICARE	278	314	36	13%
6	COMMERCIAL INSURANCE	42,989	42,151	(838)	-2%
7	NON-GOVERNMENT MANAGED CARE	39,448	43,469	4,021	10%
8	WORKER'S COMPENSATION	1,525	1,573	48	3%
9	SELF- PAY/UNINSURED	12,584	14,012	1,428	11%
10	SAGA	0	0	0	0%
11	OTHER	681	606	(75)	-11%
	TOTAL OUTPATIENT VISITS	188,315	198,611	10,296	5%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$18,094,150	\$19,482,193	\$1,388,043	8%
2	MEDICARE MANAGED CARE	\$1,726,648	\$2,151,990	\$425,342	25%
3	MEDICAID	\$10,076,697	\$23,017,268	\$12,940,571	128%
4	MEDICAID MANAGED CARE	\$15,691,850	\$4,131,508	(\$11,560,342)	-74%
5	CHAMPUS/TRICARE	\$290,028	\$322,117	\$32,089	11%
6	COMMERCIAL INSURANCE	\$27,027,564	\$25,504,326	(\$1,523,238)	-6%
7	NON-GOVERNMENT MANAGED CARE	\$22,069,944	\$22,799,084	\$729,140	3%
8	WORKER'S COMPENSATION	\$1,964,289	\$2,172,979	\$208,690	11%
9	SELF- PAY/UNINSURED	\$10,701,566	\$12,066,037	\$1,364,471	13%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$224,466	\$174,677	(\$49,789)	-22%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$107,867,202	\$111,822,179	\$3,954,977	4%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$3,175,362	\$3,720,817	\$545,455	17%
2	MEDICARE MANAGED CARE	\$385,171	\$624,704	\$239,533	62%
3	MEDICAID	\$1,224,281	\$3,315,492	\$2,091,211	171%
4	MEDICAID MANAGED CARE	\$3,029,757	\$1,013,449	(\$2,016,308)	-67%
5	CHAMPUS/TRICARE	\$92,026	\$105,963	\$13,937	15%
6	COMMERCIAL INSURANCE	\$16,689,049	\$16,457,065	(\$231,984)	-1%
7	NON-GOVERNMENT MANAGED CARE	\$14,413,621	\$14,867,571	\$453,950	3%
8	WORKER'S COMPENSATION	\$1,311,265	\$1,503,097	\$191,832	15%
9	SELF- PAY/UNINSURED	\$1,518,749	\$1,759,626	\$240,877	16%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$41,382	\$19,222	(\$22,160)	-54%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$41,880,663	\$43,387,006	\$1,506,343	4%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	7,689	8,051	362	5%
2	MEDICARE MANAGED CARE	700	916	216	31%
3	MEDICAID	5,254	14,196	8,942	170%
4	MEDICAID MANAGED CARE	11,351	3,002	(8,349)	-74%
5	CHAMPUS/TRICARE	155	179	24	15%
6	COMMERCIAL INSURANCE	12,501	11,704	(797)	-6%
7	NON-GOVERNMENT MANAGED CARE	10,297	10,607	310	3%
8	WORKER'S COMPENSATION	1,295	1,344	49	4%
9	SELF- PAY/UNINSURED	5,619	6,256	637	11%
10	SAGA	0	0	0	0%
11	OTHER	131	107	(24)	-18%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	54,992	56,362	1,370	2%

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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
I.	<u>OPERATING EXPENSE BY CATEGORY</u>				
A.	<u>Salaries & Wages:</u>				
1	Nursing Salaries	\$58,301,687	\$51,198,252	(\$7,103,435)	-12%
2	Physician Salaries	\$7,419,911	\$7,349,665	(\$70,246)	-1%
3	Non-Nursing, Non-Physician Salaries	\$128,541,073	\$132,952,743	\$4,411,670	3%
	Total Salaries & Wages	\$194,262,671	\$191,500,660	(\$2,762,011)	-1%
B.	<u>Fringe Benefits:</u>				
1	Nursing Fringe Benefits	\$20,247,827	\$17,759,434	(\$2,488,393)	-12%
2	Physician Fringe Benefits	\$2,576,891	\$2,523,856	(\$53,035)	-2%
3	Non-Nursing, Non-Physician Fringe Benefits	\$44,641,545	\$45,843,656	\$1,202,111	3%
	Total Fringe Benefits	\$67,466,263	\$66,126,946	(\$1,339,317)	-2%
C.	<u>Contractual Labor Fees:</u>				
1	Nursing Fees	\$412,766	\$518,598	\$105,832	26%
2	Physician Fees	\$45,908,952	\$55,286,603	\$9,377,651	20%
3	Non-Nursing, Non-Physician Fees	\$490,035	\$547,540	\$57,505	12%
	Total Contractual Labor Fees	\$46,811,753	\$56,352,741	\$9,540,988	20%
D.	<u>Medical Supplies and Pharmaceutical Cost:</u>				
1	Medical Supplies	\$51,736,677	\$48,662,830	(\$3,073,847)	-6%
2	Pharmaceutical Costs	\$19,855,665	\$23,316,383	\$3,460,718	17%
	Total Medical Supplies and Pharmaceutical Cost	\$71,592,342	\$71,979,213	\$386,871	1%
E.	<u>Depreciation and Amortization:</u>				
1	Depreciation-Building	\$9,652,053	\$11,276,350	\$1,624,297	17%
2	Depreciation-Equipment	\$17,629,693	\$20,152,532	\$2,522,839	14%
3	Amortization	\$88,203	\$234,617	\$146,414	166%
	Total Depreciation and Amortization	\$27,369,949	\$31,663,499	\$4,293,550	16%
F.	<u>Bad Debts:</u>				
1	Bad Debts	\$18,183,085	\$19,413,218	\$1,230,133	7%
G.	<u>Interest Expense:</u>				
1	Interest Expense	\$4,587,742	\$4,156,056	(\$431,686)	-9%
H.	<u>Malpractice Insurance Cost:</u>				
1	Malpractice Insurance Cost	\$6,373,521	\$6,798,516	\$424,995	7%
I.	<u>Utilities:</u>				
1	Water	\$462,231	\$588,064	\$125,833	27%
2	Natural Gas	\$141,222	\$124,288	(\$16,934)	-12%
3	Oil	\$1,838,684	\$2,451,108	\$612,424	33%
4	Electricity	\$3,002,549	\$1,764,549	(\$1,238,000)	-41%
5	Telephone	\$781,414	\$803,386	\$21,972	3%
6	Other Utilities	\$20,157	\$23,392	\$3,235	16%
	Total Utilities	\$6,246,257	\$5,754,787	(\$491,470)	-8%
J.	<u>Business Expenses:</u>				
1	Accounting Fees	\$440,724	\$528,456	\$87,732	20%
2	Legal Fees	\$1,759,483	\$1,575,129	(\$184,354)	-10%
3	Consulting Fees	\$3,631,996	\$3,144,608	(\$487,388)	-13%
4	Dues and Membership	\$1,231,947	\$2,379,562	\$1,147,615	93%
5	Equipment Leases	\$5,858,538	\$7,154,556	\$1,296,018	22%
6	Building Leases	\$0	\$0	\$0	0%
7	Repairs and Maintenance	\$7,767,449	\$9,325,869	\$1,558,420	20%
8	Insurance	\$848,225	\$803,571	(\$44,654)	-5%

DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$510,240	\$509,660	(\$580)	0%
10	Conferences	\$362,374	\$346,826	(\$15,548)	-4%
11	Property Tax	\$216,077	\$205,513	(\$10,564)	-5%
12	General Supplies	\$9,571,824	\$1,574,038	(\$7,997,786)	-84%
13	Licenses and Subscriptions	\$304,487	\$371,813	\$67,326	22%
14	Postage and Shipping	\$632,087	\$662,491	\$30,404	5%
15	Advertising	\$1,702,716	\$753,853	(\$948,863)	-56%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$8,756,216	\$8,756,216	0%
18	Computer hardware & small equipment	\$0	\$326,425	\$326,425	0%
19	Dietary / Food Services	\$0	\$5,779,814	\$5,779,814	0%
20	Lab Fees / Red Cross charges	\$0	\$4,293,697	\$4,293,697	0%
21	Billing & Collection / Bank Fees	\$0	\$1,254,247	\$1,254,247	0%
22	Recruiting / Employee Education & Recognition	\$0	\$846,262	\$846,262	0%
23	Laundry / Linen	\$0	\$1,427,496	\$1,427,496	0%
24	Professional / Physician Fees	\$0	\$132,876	\$132,876	0%
25	Waste disposal	\$0	\$471,665	\$471,665	0%
26	Purchased Services - Medical	\$0	\$287,936	\$287,936	0%
27	Purchased Services - Non Medical	\$0	\$8,138,981	\$8,138,981	0%
28	Other Business Expenses	\$17,740,218	\$0	(\$17,740,218)	-100%
	Total Business Expenses	\$52,578,385	\$61,051,560	\$8,473,175	16%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$495,471,968	\$514,797,196	\$19,325,228	4%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$46,845,167	\$54,474,769	\$7,629,602	16%
2	General Accounting	\$1,099,748	\$1,159,533	\$59,785	5%
3	Patient Billing & Collection	\$5,580,340	\$5,397,233	(\$183,107)	-3%
4	Admitting / Registration Office	\$2,710,264	\$2,264,136	(\$446,128)	-16%
5	Data Processing	\$19,705,104	\$23,983,097	\$4,277,993	22%
6	Communications	\$2,245,393	\$2,421,315	\$175,922	8%
7	Personnel	\$5,014,584	\$3,652,357	(\$1,362,227)	-27%
8	Public Relations	\$238,047	\$224,908	(\$13,139)	-6%
9	Purchasing	\$1,553,035	\$1,434,172	(\$118,863)	-8%
10	Dietary and Cafeteria	\$7,665,837	\$5,396,526	(\$2,269,311)	-30%
11	Housekeeping	\$6,740,127	\$5,725,970	(\$1,014,157)	-15%
12	Laundry & Linen	\$0	\$108,195	\$108,195	0%
13	Operation of Plant	\$9,626,613	\$13,100,462	\$3,473,849	36%
14	Security	\$6,727,095	\$3,401,797	(\$3,325,298)	-49%
15	Repairs and Maintenance	\$2,045,789	\$1,988,884	(\$56,905)	-3%
16	Central Sterile Supply	\$2,291,251	\$3,321,930	\$1,030,679	45%
17	Pharmacy Department	\$12,048,321	\$11,762,899	(\$285,422)	-2%
18	Other General Services	\$185,369	\$252,303	\$66,934	36%
	Total General Services	\$132,322,084	\$140,070,486	\$7,748,402	6%
B.	Professional Services:				
1	Medical Care Administration	\$0	\$0	\$0	0%
2	Residency Program	\$13,127,183	\$13,223,128	\$95,945	1%
3	Nursing Services Administration	\$7,555,521	\$7,673,335	\$117,814	2%
4	Medical Records	\$2,301,068	\$2,132,344	(\$168,724)	-7%

DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
5	Social Service	\$4,176,394	\$4,258,857	\$82,463	2%
6	Other Professional Services	\$511,860	\$563,112	\$51,252	10%
	Total Professional Services	\$27,672,026	\$27,850,776	\$178,750	1%
C.	<u>Special Services:</u>				
1	Operating Room	\$44,206,484	\$46,195,071	\$1,988,587	4%
2	Recovery Room	\$4,221,166	\$4,162,608	(\$58,558)	-1%
3	Anesthesiology	\$2,812,014	\$2,797,652	(\$14,362)	-1%
4	Delivery Room	\$5,265,671	\$5,665,172	\$399,501	8%
5	Diagnostic Radiology	\$9,615,624	\$8,723,006	(\$892,618)	-9%
6	Diagnostic Ultrasound	\$2,120,683	\$1,969,424	(\$151,259)	-7%
7	Radiation Therapy	\$4,310,049	\$4,530,084	\$220,035	5%
8	Radioisotopes	\$2,659,783	\$2,487,354	(\$172,429)	-6%
9	CT Scan	\$2,494,825	\$2,481,204	(\$13,621)	-1%
10	Laboratory	\$29,815,094	\$28,384,765	(\$1,430,329)	-5%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$16,649,748	\$18,297,366	\$1,647,618	10%
13	Electrocardiology	\$265,550	\$204,337	(\$61,213)	-23%
14	Electroencephalography	\$151,650	\$154,114	\$2,464	2%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$3,451,552	\$3,166,891	(\$284,661)	-8%
19	Pulmonary Function	\$991,968	\$1,491,887	\$499,919	50%
20	Intravenous Therapy	\$14,908,187	\$19,549,254	\$4,641,067	31%
21	Shock Therapy	\$66,784	\$87,172	\$20,388	31%
22	Psychiatry / Psychology Services	\$3,868,528	\$3,296,015	(\$572,513)	-15%
23	Renal Dialysis	\$4,249,545	\$3,091,076	(\$1,158,469)	-27%
24	Emergency Room	\$26,228,686	\$25,227,059	(\$1,001,627)	-4%
25	MRI	\$2,126,746	\$2,125,839	(\$907)	0%
26	PET Scan	\$1,211,296	\$1,038,432	(\$172,864)	-14%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$5,444,516	\$5,492,210	\$47,694	1%
29	Sleep Center	\$1,416,685	\$1,300,453	(\$116,232)	-8%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$656,768	\$616,136	(\$40,632)	-6%
32	Occupational Therapy / Physical Therapy	\$8,555,682	\$8,556,360	\$678	0%
33	Dental Clinic	\$1,900,889	\$1,886,155	(\$14,734)	-1%
34	Other Special Services	\$11,152,333	\$11,506,752	\$354,419	3%
	Total Special Services	\$210,818,506	\$214,483,848	\$3,665,342	2%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$55,429,799	\$55,912,506	\$482,707	1%
2	Intensive Care Unit	\$6,514,626	\$6,688,478	\$173,852	3%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$4,708,667	\$4,834,656	\$125,989	3%
5	Pediatric Unit	\$3,108,965	\$2,955,134	(\$153,831)	-5%
6	Maternity Unit	\$5,053,829	\$5,147,778	\$93,949	2%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$5,350,508	\$5,438,980	\$88,472	2%
9	Rehabilitation Unit	\$3,457,111	\$3,365,750	(\$91,361)	-3%
10	Ambulatory Surgery	\$6,121,279	\$9,375,458	\$3,254,179	53%
11	Home Care	\$0	\$0	\$0	0%

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$471,020,724	\$ 497,720,490	\$521,836,000
2	Other Operating Revenue	10,083,592	13,930,894	22,126,583
3	Total Operating Revenue	\$481,104,316	\$511,651,384	\$543,962,583
4	Total Operating Expenses	460,314,702	495,471,968	514,797,196
5	Income/(Loss) From Operations	\$20,789,614	\$16,179,416	\$29,165,387
6	Total Non-Operating Revenue	23,790,084	7,506,504	24,210,874
7	Excess/(Deficiency) of Revenue Over Expenses	\$44,579,698	\$23,685,920	\$53,376,261
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	4.12%	3.12%	5.13%
2	Hospital Non Operating Margin	4.71%	1.45%	4.26%
3	Hospital Total Margin	8.83%	4.56%	9.39%
4	Income/(Loss) From Operations	\$20,789,614	\$16,179,416	\$29,165,387
5	Total Operating Revenue	\$481,104,316	\$511,651,384	\$543,962,583
6	Total Non-Operating Revenue	\$23,790,084	\$7,506,504	\$24,210,874
7	Total Revenue	\$504,894,400	\$519,157,888	\$568,173,457
8	Excess/(Deficiency) of Revenue Over Expenses	\$44,579,698	\$23,685,920	\$53,376,261
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$368,034,236	\$332,255,763	\$386,002,265
2	Hospital Total Net Assets	\$424,005,127	\$388,241,578	\$444,621,099
3	Hospital Change in Total Net Assets	\$43,338,139	(\$35,763,549)	\$56,379,521
4	Hospital Change in Total Net Assets %	111.4%	-8.4%	14.5%
D. <u>Cost Data Summary</u>				
1	<u>Ratio of Cost to Charges</u>	0.44	0.44	0.43
2	Total Operating Expenses	\$460,314,702	\$495,471,968	\$514,797,196
3	Total Gross Revenue	\$1,042,814,916	\$1,113,153,089	\$1,177,078,060
4	Total Other Operating Revenue	\$7,515,933	\$11,802,461	\$19,598,257
5	<u>Private Payment to Cost Ratio</u>	1.37	1.37	1.40
6	Total Non-Government Payments	\$278,426,338	\$284,025,912	\$300,340,464

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
7	Total Uninsured Payments	\$8,030,434	\$3,211,210	\$7,736,655
8	Total Non-Government Charges	\$476,971,370	\$493,210,518	\$521,061,067
9	Total Uninsured Charges	\$27,210,293	\$28,349,076	\$36,547,912
10	Medicare Payment to Cost Ratio	0.79	0.77	0.78
11	Total Medicare Payments	\$156,075,045	\$166,023,806	\$170,634,278
12	Total Medicare Charges	\$451,586,267	\$489,956,613	\$508,736,798
13	Medicaid Payment to Cost Ratio	0.64	0.55	0.57
14	Total Medicaid Payments	\$27,587,469	\$30,627,225	\$35,364,833
15	Total Medicaid Charges	\$98,525,056	\$125,952,077	\$143,873,707
16	Uncompensated Care Cost	\$10,279,289	\$13,011,700	\$14,361,005
17	Charity Care	\$12,767,832	\$11,359,623	\$13,969,782
18	Bad Debts	\$10,687,109	\$18,183,085	\$19,413,218
19	Total Uncompensated Care	\$23,454,941	\$29,542,708	\$33,383,000
20	Uncompensated Care % of Total Expenses	2.2%	2.6%	2.8%
21	Total Operating Expenses	\$460,314,702	\$495,471,968	\$514,797,196
E. Liquidity Measures Summary				
1	Current Ratio	3.21	1.96	2.26
2	Total Current Assets	\$269,665,576	\$116,037,544	\$142,388,783
3	Total Current Liabilities	\$83,978,272	\$59,117,073	\$63,080,549
4	Days Cash on Hand	168	29	40
5	Cash and Cash Equivalents	\$26,334,940	\$36,603,282	\$53,518,078
6	Short Term Investments	173,186,305	0	0
7	Total Cash and Short Term Investments	\$199,521,245	\$36,603,282	\$53,518,078
8	Total Operating Expenses	\$460,314,702	\$495,471,968	\$514,797,196
9	Depreciation Expense	\$25,703,935	\$27,369,949	\$31,663,499
10	Operating Expenses less Depreciation Expense	\$434,610,767	\$468,102,019	\$483,133,697
11	Days Revenue in Patient Accounts Receivable	31.27	30.95	35.01

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
12	Net Patient Accounts Receivable	\$ 51,429,630	\$ 53,313,528	\$ 60,038,935
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$11,079,973	\$11,107,547	\$9,985,351
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 40,349,657	\$ 42,205,981	\$ 50,053,584
16	Total Net Patient Revenue	\$471,020,724	\$ 497,720,490	\$ 521,836,000
17	Average Payment Period	70.53	46.10	47.66
18	Total Current Liabilities	\$83,978,272	\$59,117,073	\$63,080,549
19	Total Operating Expenses	\$460,314,702	\$495,471,968	\$514,797,196
20	Depreciation Expense	\$25,703,935	\$27,369,949	\$31,663,499
21	Total Operating Expenses less Depreciation Expense	\$434,610,767	\$468,102,019	\$483,133,697
F. Solvency Measures Summary				
1	Equity Financing Ratio	70.3	54.3	57.5
2	Total Net Assets	\$424,005,127	\$388,241,578	\$444,621,099
3	Total Assets	\$603,421,824	\$715,105,959	\$773,883,884
4	Cash Flow to Total Debt Ratio	42.5	16.4	27.2
5	Excess/(Deficiency) of Revenues Over Expenses	\$44,579,698	\$23,685,920	\$53,376,261
6	Depreciation Expense	\$25,703,935	\$27,369,949	\$31,663,499
7	Excess of Revenues Over Expenses and Depreciation Expense	\$70,283,633	\$51,055,869	\$85,039,760
8	Total Current Liabilities	\$83,978,272	\$59,117,073	\$63,080,549
9	Total Long Term Debt	\$81,260,000	\$252,100,000	\$249,580,000
10	Total Current Liabilities and Total Long Term Debt	\$165,238,272	\$311,217,073	\$312,660,549
11	Long Term Debt to Capitalization Ratio	16.1	39.4	36.0
12	Total Long Term Debt	\$81,260,000	\$252,100,000	\$249,580,000
13	Total Net Assets	\$424,005,127	\$388,241,578	\$444,621,099
14	Total Long Term Debt and Total Net Assets	\$505,265,127	\$640,341,578	\$694,201,099
15	Debt Service Coverage Ratio	10.7	1.4	1.9
16	Excess Revenues over Expenses	\$44,579,698	\$23,685,920	\$53,376,261
17	Interest Expense	\$4,557,278	\$4,587,742	\$4,156,056
18	Depreciation and Amortization Expense	\$25,703,935	\$27,369,949	\$31,663,499

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
19	Principal Payments	\$2,460,000	\$35,125,000	\$43,360,000
G. Other Financial Ratios				
20	Average Age of Plant	10.7	11.0	10.2
21	Accumulated Depreciation	\$274,705,979	\$299,833,683	\$322,977,997
22	Depreciation and Amortization Expense	\$25,703,935	\$27,369,949	\$31,663,499
H. Utilization Measures Summary				
1	Patient Days	95,884	96,663	92,010
2	Discharges	20,715	20,763	19,668
3	ALOS	4.6	4.7	4.7
4	Staffed Beds	278	286	265
5	Available Beds	-	371	371
6	Licensed Beds	371	371	371
6	Occupancy of Staffed Beds	94.5%	92.6%	95.1%
7	Occupancy of Available Beds	72.0%	71.4%	67.9%
8	Full Time Equivalent Employees	2,492.8	2,541.3	2,403.9
I. Hospital Gross Revenue Payer Mix Percentage				
1	Non-Government Gross Revenue Payer Mix Percentage	43.1%	41.8%	41.2%
2	Medicare Gross Revenue Payer Mix Percentage	43.3%	44.0%	43.2%
3	Medicaid Gross Revenue Payer Mix Percentage	9.4%	11.3%	12.2%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	1.3%	0.2%	0.2%
5	Uninsured Gross Revenue Payer Mix Percentage	2.6%	2.5%	3.1%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.1%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$449,761,077	\$464,861,442	\$484,513,155
9	Medicare Gross Revenue (Charges)	\$451,586,267	\$489,956,613	\$508,736,798
10	Medicaid Gross Revenue (Charges)	\$98,525,056	\$125,952,077	\$143,873,707
11	Other Medical Assistance Gross Revenue (Charges)	\$13,675,796	\$2,704,752	\$1,924,004
12	Uninsured Gross Revenue (Charges)	\$27,210,293	\$28,349,076	\$36,547,912
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$2,056,427	\$1,329,129	\$1,482,484
14	Total Gross Revenue (Charges)	\$1,042,814,916	\$1,113,153,089	\$1,177,078,060
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	58.2%	58.3%	57.7%

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
2	Medicare Net Revenue Payer Mix Percentage	33.6%	34.5%	33.6%
3	Medicaid Net Revenue Payer Mix Percentage	5.9%	6.4%	7.0%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.3%	0.1%	0.1%
5	Uninsured Net Revenue Payer Mix Percentage	1.7%	0.7%	1.5%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$270,395,904	\$280,814,702	\$292,603,809
9	Medicare Net Revenue (Payments)	\$156,075,045	\$166,023,806	\$170,634,278
10	Medicaid Net Revenue (Payments)	\$27,587,469	\$30,627,225	\$35,364,833
11	Other Medical Assistance Net Revenue (Payments)	\$1,531,069	\$570,580	\$525,705
12	Uninsured Net Revenue (Payments)	\$8,030,434	\$3,211,210	\$7,736,655
13	CHAMPUS / TRICARE Net Revenue Payments)	\$607,084	\$362,326	\$366,056
14	Total Net Revenue (Payments)	\$464,227,005	\$481,609,849	\$507,231,336
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	8,752	8,068	7,521
2	Medicare	8,917	9,495	8,736
3	Medical Assistance	3,017	3,166	3,377
4	Medicaid	2,727	3,069	3,326
5	Other Medical Assistance	290	97	51
6	CHAMPUS / TRICARE	29	34	34
7	Uninsured (Included In Non-Government)	298	248	197
8	Total	20,715	20,763	19,668
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	1.161400	1.195200	1.211200
2	Medicare	1.348500	1.332800	1.321100
3	Medical Assistance	0.883284	1.027836	0.989153
4	Medicaid	0.865800	1.031400	0.991300
5	Other Medical Assistance	1.047700	0.915100	0.849200
6	CHAMPUS / TRICARE	0.908600	0.901500	0.962400
7	Uninsured (Included In Non-Government)	1.241600	1.215300	1.290200
8	Total Case Mix Index	1.201079	1.232124	1.221459
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	14,124	14,603	14,260
2	Emergency Room - Treated and Discharged	56,136	54,992	56,362
3	Total Emergency Room Visits	70,260	69,595	70,622

DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$169,823	\$184,071	\$14,248	8%
2	Inpatient Payments	\$24,407	\$89,455	\$65,048	267%
3	Outpatient Charges	\$178,916	\$45,506	(\$133,410)	-75%
4	Outpatient Payments	\$22,547	\$27,273	\$4,726	21%
5	Discharges	4	7	3	75%
6	Patient Days	25	24	(1)	-4%
7	Outpatient Visits (Excludes ED Visits)	42	11	(31)	-74%
8	Emergency Department Outpatient Visits	0	6	6	0%
9	Emergency Department Inpatient Admissions	1	6	5	500%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$348,739	\$229,577	(\$119,162)	-34%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$46,954	\$116,728	\$69,774	149%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$2,841,503	\$4,645,478	\$1,803,975	63%
2	Inpatient Payments	\$869,758	\$1,441,573	\$571,815	66%
3	Outpatient Charges	\$3,215,019	\$4,156,255	\$941,236	29%
4	Outpatient Payments	\$904,033	\$1,221,226	\$317,193	35%
5	Discharges	98	120	22	22%
6	Patient Days	472	580	108	23%
7	Outpatient Visits (Excludes ED Visits)	756	967	211	28%
8	Emergency Department Outpatient Visits	79	121	42	53%
9	Emergency Department Inpatient Admissions	67	79	12	18%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,056,522	\$8,801,733	\$2,745,211	45%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,773,791	\$2,662,799	\$889,008	50%

DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$2,206,792	\$0	(\$2,206,792)	-100%
2	Inpatient Payments	\$839,402	\$0	(\$839,402)	-100%
3	Outpatient Charges	\$1,396,921	\$0	(\$1,396,921)	-100%
4	Outpatient Payments	\$437,668	\$0	(\$437,668)	-100%
5	Discharges	61	0	(61)	-100%
6	Patient Days	457	0	(457)	-100%
7	Outpatient Visits (Excludes ED Visits)	328	0	(328)	-100%
8	Emergency Department Outpatient Visits	64	0	(64)	-100%
9	Emergency Department Inpatient Admissions	44	0	(44)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,603,713	\$0	(\$3,603,713)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,277,070	\$0	(\$1,277,070)	-100%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$4,819,561	\$4,731,066	(\$88,495)	-2%
2	Inpatient Payments	\$1,554,061	\$1,449,904	(\$104,157)	-7%
3	Outpatient Charges	\$1,986,574	\$4,471,653	\$2,485,079	125%
4	Outpatient Payments	\$739,266	\$2,007,458	\$1,268,192	172%
5	Discharges	133	148	15	11%
6	Patient Days	713	745	32	4%
7	Outpatient Visits (Excludes ED Visits)	467	1,041	574	123%
8	Emergency Department Outpatient Visits	140	220	80	57%
9	Emergency Department Inpatient Admissions	106	115	9	8%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,806,135	\$9,202,719	\$2,396,584	35%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,293,327	\$3,457,362	\$1,164,035	51%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
I. AETNA					
1	Inpatient Charges	\$2,275,333	\$3,724,042	\$1,448,709	64%
2	Inpatient Payments	\$711,483	\$999,878	\$288,395	41%
3	Outpatient Charges	\$2,024,448	\$3,607,071	\$1,582,623	78%
4	Outpatient Payments	\$874,702	\$1,202,903	\$328,201	38%
5	Discharges	75	98	23	31%
6	Patient Days	397	621	224	56%
7	Outpatient Visits (Excludes ED Visits)	476	839	363	76%
8	Emergency Department Outpatient Visits	74	121	47	64%
9	Emergency Department Inpatient Admissions	59	76	17	29%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,299,781	\$7,331,113	\$3,031,332	70%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,586,185	\$2,202,781	\$616,596	39%

DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J. HUMANA					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K. SECURE HORIZONS					
1	Inpatient Charges	\$10,734,214	\$16,090,165	\$5,355,951	50%
2	Inpatient Payments	\$3,085,109	\$5,214,117	\$2,129,008	69%
3	Outpatient Charges	\$9,339,872	\$12,302,814	\$2,962,942	32%
4	Outpatient Payments	\$2,608,027	\$3,261,529	\$653,502	25%
5	Discharges	350	476	126	36%
6	Patient Days	1,791	2,371	580	32%
7	Outpatient Visits (Excludes ED Visits)	2,196	2,863	667	30%
8	Emergency Department Outpatient Visits	311	423	112	36%
9	Emergency Department Inpatient Admissions	262	350	88	34%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$20,074,086	\$28,392,979	\$8,318,893	41%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,693,136	\$8,475,646	\$2,782,510	49%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$667,106	\$244,697	(\$422,409)	-63%
2	Inpatient Payments	\$206,478	\$89,825	(\$116,653)	-56%
3	Outpatient Charges	\$403,375	\$247,939	(\$155,436)	-39%
4	Outpatient Payments	\$115,242	\$63,393	(\$51,849)	-45%
5	Discharges	15	11	(4)	-27%
6	Patient Days	142	48	(94)	-66%
7	Outpatient Visits (Excludes ED Visits)	95	58	(37)	-39%
8	Emergency Department Outpatient Visits	32	25	(7)	-22%
9	Emergency Department Inpatient Admissions	12	9	(3)	-25%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,070,481	\$492,636	(\$577,845)	-54%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$321,720	\$153,218	(\$168,502)	-52%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$23,714,332	\$29,619,519	\$5,905,187	25%
	TOTAL INPATIENT PAYMENTS	\$7,290,698	\$9,284,752	\$1,994,054	27%
	TOTAL OUTPATIENT CHARGES	\$18,545,125	\$24,831,238	\$6,286,113	34%
	TOTAL OUTPATIENT PAYMENTS	\$5,701,485	\$7,783,782	\$2,082,297	37%
	TOTAL DISCHARGES	736	860	124	17%
	TOTAL PATIENT DAYS	3,997	4,389	392	10%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	4,360	5,779	1,419	33%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	700	916	216	31%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	551	635	84	15%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$42,259,457	\$54,450,757	\$12,191,300	29%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$12,992,183	\$17,068,534	\$4,076,351	31%

**DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$7,314,852	\$2,357,889	(\$4,956,963)	-68%
2	Inpatient Payments	\$1,855,792	\$292,509	(\$1,563,283)	-84%
3	Outpatient Charges	\$14,710,540	\$3,476,665	(\$11,233,875)	-76%
4	Outpatient Payments	\$3,604,229	\$495,817	(\$3,108,412)	-86%
5	Discharges	457	99	(358)	-78%
6	Patient Days	1,656	486	(1,170)	-71%
7	Outpatient Visits (Excludes ED Visits)	4,669	718	(3,951)	-85%
8	Emergency Department Outpatient Visits	4,794	1,159	(3,635)	-76%
9	Emergency Department Inpatient Admissions	118	29	(89)	-75%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$22,025,392	\$5,834,554	(\$16,190,838)	-74%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,460,021	\$788,326	(\$4,671,695)	-86%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$493,140	\$158,095	(\$335,045)	-68%
2	Inpatient Payments	\$71,764	\$5,163	(\$66,601)	-93%
3	Outpatient Charges	\$403,271	\$122,090	(\$281,181)	-70%
4	Outpatient Payments	\$27,949	\$39,500	\$11,551	41%
5	Discharges	22	12	(10)	-45%
6	Patient Days	119	32	(87)	-73%
7	Outpatient Visits (Excludes ED Visits)	128	25	(103)	-80%
8	Emergency Department Outpatient Visits	210	251	41	20%
9	Emergency Department Inpatient Admissions	17	29	12	71%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$896,411	\$280,185	(\$616,226)	-69%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$99,713	\$44,663	(\$55,050)	-55%
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F.	FIRST CHOICE OF CONNECTICUT, PREFERRED ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$2,517,677	\$700,311	(\$1,817,366)	-72%
2	Inpatient Payments	\$698,170	\$117,845	(\$580,325)	-83%
3	Outpatient Charges	\$5,333,463	\$1,384,565	(\$3,948,898)	-74%
4	Outpatient Payments	\$1,437,884	\$171,800	(\$1,266,084)	-88%
5	Discharges	170	59	(111)	-65%
6	Patient Days	544	153	(391)	-72%
7	Outpatient Visits (Excludes ED Visits)	1,693	286	(1,407)	-83%
8	Emergency Department Outpatient Visits	1,801	445	(1,356)	-75%
9	Emergency Department Inpatient Admissions	41	15	(26)	-63%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$7,851,140	\$2,084,876	(\$5,766,264)	-73%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,136,054	\$289,645	(\$1,846,409)	-86%
H.	AETNA				
1	Inpatient Charges	\$7,733,406	\$2,178,926	(\$5,554,480)	-72%
2	Inpatient Payments	\$1,839,594	\$269,383	(\$1,570,211)	-85%
3	Outpatient Charges	\$14,501,126	\$3,817,446	(\$10,683,680)	-74%
4	Outpatient Payments	\$3,571,344	\$428,078	(\$3,143,266)	-88%
5	Discharges	513	105	(408)	-80%
6	Patient Days	1,732	448	(1,284)	-74%
7	Outpatient Visits (Excludes ED Visits)	4,600	789	(3,811)	-83%
8	Emergency Department Outpatient Visits	4,546	1,147	(3,399)	-75%
9	Emergency Department Inpatient Admissions	116	33	(83)	-72%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$22,234,532	\$5,996,372	(\$16,238,160)	-73%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,410,938	\$697,461	(\$4,713,477)	-87%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$18,059,075	\$5,395,221	(\$12,663,854)	-70%
	TOTAL INPATIENT PAYMENTS	\$4,465,320	\$684,900	(\$3,780,420)	-85%
	TOTAL OUTPATIENT CHARGES	\$34,948,400	\$8,800,766	(\$26,147,634)	-75%
	TOTAL OUTPATIENT PAYMENTS	\$8,641,406	\$1,135,195	(\$7,506,211)	-87%
	TOTAL DISCHARGES	1,162	275	(887)	-76%
	TOTAL PATIENT DAYS	4,051	1,119	(2,932)	-72%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	11,090	1,818	(9,272)	-84%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	11,351	3,002	(8,349)	-74%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	292	106	(186)	-64%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$53,007,475	\$14,195,987	(\$38,811,488)	-73%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$13,106,726	\$1,820,095	(\$11,286,631)	-86%

**DANBURY HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$56,787,869	\$74,083,960	\$17,296,091	30%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$74,395,713	\$79,495,132	\$5,099,419	7%
4	Current Assets Whose Use is Limited for Current Liabilities	\$2,780,279	\$2,100,896	(\$679,383)	-24%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$12,213,567	\$11,357,589	(\$855,978)	-7%
8	Prepaid Expenses	\$16,364,779	\$17,443,644	\$1,078,865	7%
9	Other Current Assets	\$1,768,111	\$3,008,962	\$1,240,851	70%
	Total Current Assets	\$164,310,318	\$187,490,183	\$23,179,865	14%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$6,439,298	\$7,262,631	\$823,333	13%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$182,369,612	\$157,837,082	(\$24,532,530)	-13%
	Total Noncurrent Assets Whose Use is Limited:	\$188,808,910	\$165,099,713	(\$23,709,197)	-13%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$210,629,807	\$245,357,292	\$34,727,485	16%
7	Other Noncurrent Assets	\$25,794,210	\$27,793,776	\$1,999,566	8%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$627,841,143	\$663,576,198	\$35,735,055	6%
2	Less: Accumulated Depreciation	\$388,704,091	\$417,555,078	\$28,850,987	\$0
	Property, Plant and Equipment, Net	\$239,137,052	\$246,021,120	\$6,884,068	3%
3	Construction in Progress	\$27,578,848	\$39,399,365	\$11,820,517	43%
	Total Net Fixed Assets	\$266,715,900	\$285,420,485	\$18,704,585	7%
	Total Assets	\$856,259,145	\$911,161,449	\$54,902,304	6%

WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$41,087,673	\$34,549,615	(\$6,538,058)	-16%
2	Salaries, Wages and Payroll Taxes	\$28,131,050	\$33,802,144	\$5,671,094	20%
3	Due To Third Party Payers	\$15,337,343	\$12,492,073	(\$2,845,270)	-19%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$3,024,773	\$2,050,090	(\$974,683)	-32%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	Total Current Liabilities	\$87,580,839	\$82,893,922	(\$4,686,917)	-5%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$253,514,718	\$250,593,765	(\$2,920,953)	-1%
	Total Long Term Debt	\$253,514,718	\$250,593,765	(\$2,920,953)	-1%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$166,759,146	\$233,799,181	\$67,040,035	40%
	Total Long Term Liabilities	\$420,273,864	\$484,392,946	\$64,119,082	15%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$286,369,831	\$277,089,185	(\$9,280,646)	-3%
2	Temporarily Restricted Net Assets	\$30,149,404	\$33,826,104	\$3,676,700	12%
3	Permanently Restricted Net Assets	\$31,885,207	\$32,959,292	\$1,074,085	3%
	Total Net Assets	\$348,404,442	\$343,874,581	(\$4,529,861)	-1%
	Total Liabilities and Net Assets	\$856,259,145	\$911,161,449	\$54,902,304	6%

WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,620,897,693	\$1,649,794,278	\$28,896,585	2%
2	Less: Allowances	\$884,704,840	\$895,739,602	\$11,034,762	1%
3	Less: Charity Care	\$15,667,675	\$17,133,307	\$1,465,632	9%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$720,525,178	\$736,921,369	\$16,396,191	2%
5	Other Operating Revenue	\$14,009,110	\$26,582,697	\$12,573,587	90%
6	Net Assets Released from Restrictions	\$3,167,079	\$3,324,588	\$157,509	5%
	Total Operating Revenue	\$737,701,367	\$766,828,654	\$29,127,287	4%
B. Operating Expenses:					
1	Salaries and Wages	\$350,055,265	\$351,374,481	\$1,319,216	0%
2	Fringe Benefits	\$102,484,957	\$105,429,884	\$2,944,927	3%
3	Physicians Fees	\$6,168,576	\$6,170,979	\$2,403	0%
4	Supplies and Drugs	\$200,275,229	\$192,464,356	(\$7,810,873)	-4%
5	Depreciation and Amortization	\$36,236,656	\$39,029,252	\$2,792,596	8%
6	Bad Debts	\$26,465,527	\$24,771,952	(\$1,693,575)	-6%
7	Interest	\$5,333,933	\$4,322,562	(\$1,011,371)	-19%
8	Malpractice	\$8,742,635	\$11,680,311	\$2,937,676	34%
9	Other Operating Expenses	\$10,338,542	\$13,721,517	\$3,382,975	33%
	Total Operating Expenses	\$746,101,320	\$748,965,294	\$2,863,974	0%
	Income/(Loss) From Operations	(\$8,399,953)	\$17,863,360	\$26,263,313	-313%
C. Non-Operating Revenue:					
1	Income from Investments	\$9,355,429	\$2,445,895	(\$6,909,534)	-74%
2	Gifts, Contributions and Donations	\$3,166,972	\$1,936,206	(\$1,230,766)	-39%
3	Other Non-Operating Gains/(Losses)	(\$6,929,617)	\$20,266,992	\$27,196,609	-392%
	Total Non-Operating Revenue	\$5,592,784	\$24,649,093	\$19,056,309	341%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$2,807,169)	\$42,512,453	\$45,319,622	-1614%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	(\$2,807,169)	\$42,512,453	\$45,319,622	-1614%

WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$702,067,144	\$720,525,178	\$736,921,369
2	Other Operating Revenue	14,892,893	17,176,189	29,907,285
3	Total Operating Revenue	\$716,960,037	\$737,701,367	\$766,828,654
4	Total Operating Expenses	699,978,062	746,101,320	748,965,294
5	Income/(Loss) From Operations	\$16,981,975	(\$8,399,953)	\$17,863,360
6	Total Non-Operating Revenue	21,776,718	5,592,784	24,649,093
7	Excess/(Deficiency) of Revenue Over Expenses	\$38,758,693	(\$2,807,169)	\$42,512,453
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	2.30%	-1.13%	2.26%
2	Parent Corporation Non-Operating Margin	2.95%	0.75%	3.11%
3	Parent Corporation Total Margin	5.25%	-0.38%	5.37%
4	Income/(Loss) From Operations	\$16,981,975	(\$8,399,953)	\$17,863,360
5	Total Operating Revenue	\$716,960,037	\$737,701,367	\$766,828,654
6	Total Non-Operating Revenue	\$21,776,718	\$5,592,784	\$24,649,093
7	Total Revenue	\$738,736,755	\$743,294,151	\$791,477,747
8	Excess/(Deficiency) of Revenue Over Expenses	\$38,758,693	(\$2,807,169)	\$42,512,453
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$244,887,741	\$286,369,831	\$277,089,185
2	Parent Corporation Total Net Assets	\$310,380,664	\$348,404,442	\$343,874,581
3	Parent Corporation Change in Total Net Assets	\$71,182,837	\$38,023,778	(\$4,529,861)
4	Parent Corporation Change in Total Net Assets %	129.8%	12.3%	-1.3%

WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1.29	1.88	2.26
2	Total Current Assets	\$148,919,595	\$164,310,318	\$187,490,183
3	Total Current Liabilities	\$115,379,091	\$87,580,839	\$82,893,922
4	<u>Days Cash on Hand</u>	24	29	38
5	Cash and Cash Equivalents	\$44,650,227	\$56,787,869	\$74,083,960
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$44,650,227	\$56,787,869	\$74,083,960
8	Total Operating Expenses	\$699,978,062	\$746,101,320	\$748,965,294
9	Depreciation Expense	\$34,179,238	\$36,236,656	\$39,029,252
10	Operating Expenses less Depreciation Expense	\$665,798,824	\$709,864,664	\$709,936,042
11	<u>Days Revenue in Patient Accounts Receivable</u>	32	30	33
12	Net Patient Accounts Receivable	\$ 76,702,649	\$ 74,395,713	\$ 79,495,132
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$14,882,325	\$15,337,343	\$12,492,073
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 61,820,324	\$ 59,058,370	\$ 67,003,059
16	Total Net Patient Revenue	\$702,067,144	\$720,525,178	\$736,921,369
17	<u>Average Payment Period</u>	63	45	43
18	Total Current Liabilities	\$115,379,091	\$87,580,839	\$82,893,922
19	Total Operating Expenses	\$699,978,062	\$746,101,320	\$748,965,294
20	Depreciation Expense	\$34,179,238	\$36,236,656	\$39,029,252
21	Total Operating Expenses less Depreciation Expense	\$665,798,824	\$709,864,664	\$709,936,042

WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	43.9	40.7	37.7
2	Total Net Assets	\$310,380,664	\$348,404,442	\$343,874,581
3	Total Assets	\$707,814,625	\$856,259,145	\$911,161,449
4	<u>Cash Flow to Total Debt Ratio</u>	35.1	9.8	24.5
5	Excess/(Deficiency) of Revenues Over Expenses	\$38,758,693	(\$2,807,169)	\$42,512,453
6	Depreciation Expense	\$34,179,238	\$36,236,656	\$39,029,252
7	Excess of Revenues Over Expenses and Depreciation Expense	\$72,937,931	\$33,429,487	\$81,541,705
8	Total Current Liabilities	\$115,379,091	\$87,580,839	\$82,893,922
9	Total Long Term Debt	\$92,471,763	\$253,514,718	\$250,593,765
10	Total Current Liabilities and Total Long Term Debt	\$207,850,854	\$341,095,557	\$333,487,687
11	<u>Long Term Debt to Capitalization Ratio</u>	23.0	42.1	42.2
12	Total Long Term Debt	\$92,471,763	\$253,514,718	\$250,593,765
13	Total Net Assets	\$310,380,664	\$348,404,442	\$343,874,581
14	Total Long Term Debt and Total Net Assets	\$402,852,427	\$601,919,160	\$594,468,346

		DANBURY HOSPITAL						
		TWELVE MONTHS ACTUAL FILING						
		FISCAL YEAR 2012						
		REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT						
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
			DISCHARGES				OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	# PATIENT		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	61,851	14,216	14,495	175	227	96.8%	74.6%
2	ICU/CCU (Excludes Neonatal ICU)	3,861	175	0	12	30	88.2%	35.3%
3	Psychiatric: Ages 0 to 17	21	2	2	1	1	5.8%	5.8%
4	Psychiatric: Ages 18+	6,595	705	711	19	22	95.1%	82.1%
	TOTAL PSYCHIATRIC	6,616	707	713	20	23	90.6%	78.8%
5	Rehabilitation	4,090	291	290	12	14	93.4%	80.0%
6	Maternity	6,219	2,071	2,065	18	32	94.7%	53.2%
7	Newborn	4,643	1,814	1,812	13	26	97.9%	48.9%
8	Neonatal ICU	4,197	264	0	12	15	95.8%	76.7%
9	Pediatric	533	305	294	3	4	48.7%	36.5%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	87,367	17,854	17,857	252	345	95.0%	69.4%
	TOTAL INPATIENT BED UTILIZATION	92,010	19,668	19,669	265	371	95.1%	67.9%
	TOTAL INPATIENT REPORTED YEAR	92,010	19,668	19,669	265	371	95.1%	67.9%
	TOTAL INPATIENT PRIOR YEAR	96,663	20,763	18,846	286	371	92.6%	71.4%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-4,653	-1,095	823	-21	0	2.5%	-3.4%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-5%	-5%	4%	-7%	0%	3%	-5%
	Total Licensed Beds and Bassinets	371						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	12,277	10,946	-1,331	-11%
2	Outpatient Scans (Excluding Emergency Department Scans)	13,597	13,523	-74	-1%
3	Emergency Department Scans	10,103	10,010	-93	-1%
4	Other Non-Hospital Providers' Scans (A)	6,793	5,653	-1,140	-17%
	Total CT Scans	42,770	40,132	-2,638	-6%
B. MRI Scans (A)					
1	Inpatient Scans	1,309	1,188	-121	-9%
2	Outpatient Scans (Excluding Emergency Department Scans)	6,963	6,926	-37	-1%
3	Emergency Department Scans	157	204	47	30%
4	Other Non-Hospital Providers' Scans (A)	6,606	6,480	-126	-2%
	Total MRI Scans	15,035	14,798	-237	-2%
C. PET Scans (A)					
1	Inpatient Scans	5	0	-5	-100%
2	Outpatient Scans (Excluding Emergency Department Scans)	183	6	-177	-97%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	188	6	-182	-97%
D. PET/CT Scans (A)					
1	Inpatient Scans	8	4	-4	-50%
2	Outpatient Scans (Excluding Emergency Department Scans)	663	632	-31	-5%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	671	636	-35	-5%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	322	377	55	17%
2	Outpatient Procedures	11,654	9,763	-1,891	-16%
	Total Linear Accelerator Procedures	11,976	10,140	-1,836	-15%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	856	864	8	1%
2	Outpatient Procedures	856	864	8	1%
	Total Cardiac Catheterization Procedures	1,712	1,728	16	1%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	107	132	25	23%
2	Elective Procedures	318	299	-19	-6%
	Total Cardiac Angioplasty Procedures	425	431	6	1%
H. Electrophysiology Studies					
1	Inpatient Studies	24	24	0	0%
2	Outpatient Studies	115	95	-20	-17%
	Total Electrophysiology Studies	139	119	-20	-14%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	4,442	4,322	-120	-3%
2	Outpatient Surgical Procedures	7,776	10,811	3,035	39%
	Total Surgical Procedures	12,218	15,133	2,915	24%
J. Endoscopy Procedures					

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	909	795	-114	-13%
2	Outpatient Endoscopy Procedures	9,777	10,519	742	8%
	Total Endoscopy Procedures	10,686	11,314	628	6%
K.	<u>Hospital Emergency Room Visits</u>				
1	Emergency Room Visits: Treated and Admitted	14,603	14,260	-343	-2%
2	Emergency Room Visits: Treated and Discharged	54,992	56,362	1,370	2%
	Total Emergency Room Visits	69,595	70,622	1,027	1%
L.	<u>Hospital Clinic Visits</u>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	12,421	12,816	395	3%
3	Psychiatric Clinic Visits	20,411	22,067	1,656	8%
4	Medical Clinic Visits	45,970	61,238	15,268	33%
5	Specialty Clinic Visits	2,569	2,319	-250	-10%
	Total Hospital Clinic Visits	81,371	98,440	17,069	21%
M.	<u>Other Hospital Outpatient Visits</u>				
1	Rehabilitation (PT/OT/ST)	42,519	46,077	3,558	8%
2	Cardiology	6,501	6,260	-241	-4%
3	Chemotherapy	2,931	6,199	3,268	111%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	0	0	0	0%
	Total Other Hospital Outpatient Visits	51,951	58,536	6,585	13%
N.	<u>Hospital Full Time Equivalent Employees</u>				
1	Total Nursing FTEs	572.3	567.8	-4.5	-1%
2	Total Physician FTEs	97.8	101.5	3.7	4%
3	Total Non-Nursing and Non-Physician FTEs	1,871.2	1,734.6	-136.6	-7%
	Total Hospital Full Time Equivalent Employees	2,541.3	2,403.9	-137.4	-5%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
A.	<u>Outpatient Surgical Procedures</u>				
1	Hospital	7,776	10,811	3,035	39%
	Total Outpatient Surgical Procedures(A)	7,776	10,811	3,035	39%
B.	<u>Outpatient Endoscopy Procedures</u>				
1	Hospital	9,777	10,519	742	8%
	Total Outpatient Endoscopy Procedures(B)	9,777	10,519	742	8%
C.	<u>Outpatient Hospital Emergency Room Visits</u>				
1	Hospital	54,992	56,362	1,370	2%
	Total Outpatient Hospital Emergency Room Visits(C)	54,992	56,362	1,370	2%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
I.	<u>DATA BY MAJOR PAYER CATEGORY</u>				
A.	<u>MEDICARE</u>				
	<u>MEDICARE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$291,864,516	\$286,880,905	(\$4,983,611)	-2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$98,949,663	\$96,248,763	(\$2,700,900)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	33.90%	33.55%	-0.35%	-1%
4	DISCHARGES	9,495	8,736	(759)	-8%
5	CASE MIX INDEX (CMI)	1.33280	1.32110	(0.01170)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	12,654,93600	11,541,12960	(1,113,80640)	-9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,819.06	\$8,339.63	\$520.57	7%
8	PATIENT DAYS	52,749	48,594	(4,155)	-8%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,875.86	\$1,980.67	\$104.81	6%
10	AVERAGE LENGTH OF STAY	5.6	5.6	0.0	0%
	<u>MEDICARE OUTPATIENT</u>				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$198,092,097	\$221,855,893	\$23,763,796	12%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$67,074,143	\$74,385,515	\$7,311,372	11%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	33.86%	33.53%	-0.33%	-1%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	67.87%	77.33%	9.46%	14%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,444.37524	6,755.88039	311.50515	5%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$10,408.17	\$11,010.48	\$602.32	6%
	<u>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</u>				
17	TOTAL ACCRUED CHARGES	\$489,956,613	\$508,736,798	\$18,780,185	4%
18	TOTAL ACCRUED PAYMENTS	\$166,023,806	\$170,634,278	\$4,610,472	3%
19	TOTAL ALLOWANCES	\$323,932,807	\$338,102,520	\$14,169,713	4%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
B.	<u>NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</u>				
	<u>NON-GOVERNMENT INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$190,380,782	\$183,085,674	(\$7,295,108)	-4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$112,612,777	\$108,067,227	(\$4,545,550)	-4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	59.15%	59.03%	-0.13%	0%
4	DISCHARGES	8,068	7,521	(547)	-7%
5	CASE MIX INDEX (CMI)	1.19520	1.21120	0.01600	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	9,642.87360	9,109.43520	(533.43840)	-6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,678.34	\$11,863.22	\$184.88	2%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,859.29)	(\$3,523.59)	\$335.70	-9%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$37,214,601)	(\$32,097,898)	\$5,116,703	-14%
10	PATIENT DAYS	30,391	27,864	(2,527)	-8%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,705.46	\$3,878.38	\$172.92	5%
12	AVERAGE LENGTH OF STAY	3.8	3.7	(0.1)	-2%
	<u>NON-GOVERNMENT OUTPATIENT</u>				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$302,829,736	\$337,975,393	\$35,145,657	12%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$171,413,135	\$192,273,237	\$20,860,102	12%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	56.60%	56.89%	0.29%	1%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	159.07%	184.60%	25.53%	16%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	12,833.38730	13,883.73473	1,050.34743	8%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$13,356.81	\$13,848.81	\$492.00	4%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$2,948.64)	(\$2,838.33)	\$110.32	-4%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$37,841,078)	(\$39,406,594)	(\$1,565,515)	4%
	<u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u>				
21	TOTAL ACCRUED CHARGES	\$493,210,518	\$521,061,067	\$27,850,549	6%
22	TOTAL ACCRUED PAYMENTS	\$284,025,912	\$300,340,464	\$16,314,552	6%
23	TOTAL ALLOWANCES	\$209,184,606	\$220,720,603	\$11,535,997	6%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$75,055,679)	(\$71,504,492)	\$3,551,187	-5%
	<u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u>				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$440,484,262	\$457,174,326	\$16,690,064	4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$274,413,100	\$285,461,328	\$11,048,228	4%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$166,071,162	\$171,712,998	\$5,641,836	3%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	37.70%	37.56%	-0.14%	

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$5,413,243	\$6,349,011	\$935,768	17%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$613,179	\$1,343,992	\$730,813	119%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	11.33%	21.17%	9.84%	87%
4	DISCHARGES	248	197	(51)	-21%
5	CASE MIX INDEX (CMI)	1.21530	1.29020	0.07490	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	301.39440	254.16940	(47.22500)	-16%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,034.47	\$5,287.78	\$3,253.31	160%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$9,643.87	\$6,575.44	(\$3,068.43)	-32%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$5,784.58	\$3,051.85	(\$2,732.73)	-47%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,743,441	\$775,687	(\$967,754)	-56%
11	PATIENT DAYS	960	751	(209)	-22%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$638.73	\$1,789.60	\$1,150.88	180%
13	AVERAGE LENGTH OF STAY	3.9	3.8	(0.1)	-2%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$22,935,833	\$30,198,901	\$7,263,068	32%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,598,031	\$6,392,663	\$3,794,632	146%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	11.33%	21.17%	9.84%	87%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	423.70%	475.65%	51.95%	12%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,050.77245	937.02523	(113.74721)	-11%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,472.50	\$6,822.30	\$4,349.80	176%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$10,884.32	\$7,026.52	(\$3,857.80)	-35%
21	MEDICARE - UNINSURED OP PMT / OPED	\$7,935.67	\$4,188.19	(\$3,747.48)	-47%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,338,586	\$3,924,439	(\$4,414,147)	-53%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$28,349,076	\$36,547,912	\$8,198,836	29%
24	TOTAL ACCRUED PAYMENTS	\$3,211,210	\$7,736,655	\$4,525,445	141%
25	TOTAL ALLOWANCES	\$25,137,866	\$28,811,257	\$3,673,391	15%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,082,027	\$4,700,126	(\$5,381,901)	-53%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
D.	<u>STATE OF CONNECTICUT MEDICAID</u>				
	<u>MEDICAID INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$59,876,239	\$72,740,335	\$12,864,096	21%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,451,349	\$18,124,266	\$3,672,917	25%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.14%	24.92%	0.78%	3%
4	DISCHARGES	3,069	3,326	257	8%
5	CASE MIX INDEX (CMI)	1.03140	0.99130	(0.04010)	-4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,165.36660	3,297.06380	131.69720	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,565.46	\$5,497.09	\$931.63	20%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$7,112.88	\$6,366.13	(\$746.76)	-10%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,253.60	\$2,842.54	(\$411.06)	-13%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,298,832	\$9,372,030	(\$926,802)	-9%
11	PATIENT DAYS	12,889	15,198	2,309	18%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,121.22	\$1,192.54	\$71.33	6%
13	AVERAGE LENGTH OF STAY	4.2	4.6	0.4	9%
	<u>MEDICAID OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$66,075,838	\$71,133,372	\$5,057,534	8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$16,175,876	\$17,240,567	\$1,064,691	7%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.48%	24.24%	-0.24%	-1%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	110.35%	97.79%	-12.56%	-11%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,386.76494	3,252.52276	(134.24218)	-4%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,776.20	\$5,300.68	\$524.47	11%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$8,580.61	\$8,548.14	(\$32.47)	0%
21	MEDICARE - MEDICAID OP PMT / OPED	\$5,631.97	\$5,709.81	\$77.84	1%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$19,074,144	\$18,571,284	(\$502,860)	-3%
	<u>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$125,952,077	\$143,873,707	\$17,921,630	14%
24	TOTAL ACCRUED PAYMENTS	\$30,627,225	\$35,364,833	\$4,737,608	15%
25	TOTAL ALLOWANCES	\$95,324,852	\$108,508,874	\$13,184,022	14%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$29,372,976	\$27,943,314	(\$1,429,663)	-5%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
E.	<u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u>				
	<u>OTHER MEDICAL ASSISTANCE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$1,572,425	\$799,376	(\$773,049)	-49%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$286,024	\$230,040	(\$55,984)	-20%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	18.19%	28.78%	10.59%	58%
4	DISCHARGES	97	51	(46)	-47%
5	CASE MIX INDEX (CMI)	0.91510	0.84920	(0.06590)	-7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	88.76470	43.30920	(45.45550)	-51%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,222.27	\$5,311.57	\$2,089.30	65%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$8,456.07	\$6,551.65	(\$1,904.42)	-23%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$4,596.78	\$3,028.06	(\$1,568.73)	-34%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$408,032	\$131,143	(\$276,889)	-68%
11	PATIENT DAYS	537	252	(285)	-53%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$532.63	\$912.86	\$380.22	71%
13	AVERAGE LENGTH OF STAY	5.5	4.9	(0.6)	-11%
	<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,132,327	\$1,124,628	(\$7,699)	-1%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$284,556	\$295,665	\$11,109	4%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.13%	26.29%	1.16%	5%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	72.01%	140.69%	68.68%	95%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	69.85117	71.75100	1.89984	3%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,073.75	\$4,120.71	\$46.96	1%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$9,283.06	\$9,728.10	\$445.04	5%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$6,334.42	\$6,889.78	\$555.35	9%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$442,467	\$494,348	\$51,882	12%
	<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$2,704,752	\$1,924,004	(\$780,748)	-29%
24	TOTAL ACCRUED PAYMENTS	\$570,580	\$525,705	(\$44,875)	-8%
25	TOTAL ALLOWANCES	\$2,134,172	\$1,398,299	(\$735,873)	-34%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$850,499	\$625,491	(\$225,008)	-26%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
F.	<u>TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</u>				
	<u>TOTAL MEDICAL ASSISTANCE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$61,448,664	\$73,539,711	\$12,091,047	20%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,737,373	\$18,354,306	\$3,616,933	25%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	23.98%	24.96%	0.98%	4%
4	DISCHARGES	3,166	3,377	211	7%
5	CASE MIX INDEX (CMI)	1.02784	0.98915	(0.03868)	-4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,254.13130	3,340.37300	86.24170	3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,528.82	\$5,494.69	\$965.87	21%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$7,149.52	\$6,368.53	(\$780.99)	-11%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,290.24	\$2,844.94	(\$445.29)	-14%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,706,864	\$9,503,172	(\$1,203,692)	-11%
11	PATIENT DAYS	13,426	15,450	2,024	15%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,097.67	\$1,187.98	\$90.31	8%
13	AVERAGE LENGTH OF STAY	4.2	4.6	0.3	8%
	<u>TOTAL MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$67,208,165	\$72,258,000	\$5,049,835	8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$16,460,432	\$17,536,232	\$1,075,800	7%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.49%	24.27%	-0.22%	-1%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	109.37%	98.26%	-11.12%	-10%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,456.61610	3,324.27376	(132.34234)	-4%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,762.01	\$5,275.21	\$513.20	11%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$8,594.80	\$8,573.61	(\$21.20)	0%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,646.16	\$5,735.28	\$89.12	2%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$19,516,611	\$19,065,632	(\$450,979)	-2%
	<u>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$128,656,829	\$145,797,711	\$17,140,882	13%
24	TOTAL ACCRUED PAYMENTS	\$31,197,805	\$35,890,538	\$4,692,733	15%
25	TOTAL ALLOWANCES	\$97,459,024	\$109,907,173	\$12,448,149	13%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
G.	<u>CHAMPUS / TRICARE</u>				
	<u>CHAMPUS / TRICARE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$632,468	\$494,495	(\$137,973)	-22%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$199,476	\$158,895	(\$40,581)	-20%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	31.54%	32.13%	0.59%	2%
4	DISCHARGES	34	34	0	0%
5	CASE MIX INDEX (CMI)	0.90150	0.96240	0.06090	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	30.65100	32.72160	2.07060	7%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,507.98	\$4,855.97	(\$1,652.01)	-25%
8	PATIENT DAYS	97	102	5	5%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,056.45	\$1,557.79	(\$498.66)	-24%
10	AVERAGE LENGTH OF STAY	2.9	3.0	0.1	5%
	<u>CHAMPUS / TRICARE OUTPATIENT</u>				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$696,661	\$987,989	\$291,328	42%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$162,850	\$207,161	\$44,311	27%
	<u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u>				
13	TOTAL ACCRUED CHARGES	\$1,329,129	\$1,482,484	\$153,355	12%
14	TOTAL ACCRUED PAYMENTS	\$362,326	\$366,056	\$3,730	1%
15	TOTAL ALLOWANCES	\$966,803	\$1,116,428	\$149,625	15%
H.	<u>OTHER DATA</u>				
1	OTHER OPERATING REVENUE	\$11,802,461	\$19,598,257	\$7,795,796	66%
2	TOTAL OPERATING EXPENSES	\$495,471,968	\$514,797,196	\$19,325,228	4%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
	<u>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</u>				
4	CHARITY CARE (CHARGES)	\$11,359,623	\$13,969,782	\$2,610,159	23%
5	BAD DEBTS (CHARGES)	\$18,183,085	\$19,413,218	\$1,230,133	7%
6	UNCOMPENSATED CARE (CHARGES)	\$29,542,708	\$33,383,000	\$3,840,292	13%
7	COST OF UNCOMPENSATED CARE	\$12,756,105	\$14,353,877	\$1,597,773	13%
	<u>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</u>				
8	TOTAL ACCRUED CHARGES	\$128,656,829	\$145,797,711	\$17,140,882	13%
9	TOTAL ACCRUED PAYMENTS	\$31,197,805	\$35,890,538	\$4,692,733	15%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$55,552,117	\$62,689,466	\$7,137,349	13%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$24,354,312	\$26,798,928	\$2,444,616	10%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
II.	<u>AGGREGATE DATA</u>				
A.	<u>TOTALS - ALL PAYERS</u>				
1	TOTAL INPATIENT CHARGES	\$544,326,430	\$544,000,785	(\$325,645)	0%
2	TOTAL INPATIENT PAYMENTS	\$226,499,289	\$222,829,191	(\$3,670,098)	-2%
3	TOTAL INPATIENT PAYMENTS / CHARGES	41.61%	40.96%	-0.65%	-2%
4	TOTAL DISCHARGES	20,763	19,668	(1,095)	-5%
5	TOTAL CASE MIX INDEX	1.23212	1.22146	(0.01066)	-1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	25,582,59190	24,023,65940	(1,558,93250)	-6%
7	TOTAL OUTPATIENT CHARGES	\$568,826,659	\$633,077,275	\$64,250,616	11%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	104.50%	116.37%	11.87%	11%
9	TOTAL OUTPATIENT PAYMENTS	\$255,110,560	\$284,402,145	\$29,291,585	11%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	44.85%	44.92%	0.08%	0%
11	TOTAL CHARGES	\$1,113,153,089	\$1,177,078,060	\$63,924,971	6%
12	TOTAL PAYMENTS	\$481,609,849	\$507,231,336	\$25,621,487	5%
13	TOTAL PAYMENTS / TOTAL CHARGES	43.27%	43.09%	-0.17%	0%
14	PATIENT DAYS	96,663	92,010	(4,653)	-5%
B.	<u>TOTALS - ALL GOVERNMENT PAYERS</u>				
1	INPATIENT CHARGES	\$353,945,648	\$360,915,111	\$6,969,463	2%
2	INPATIENT PAYMENTS	\$113,886,512	\$114,761,964	\$875,452	1%
3	GOVT. INPATIENT PAYMENTS / CHARGES	32.18%	31.80%	-0.38%	-1%
4	DISCHARGES	12,695	12,147	(548)	-4%
5	CASE MIX INDEX	1.25559	1.22781	(0.02778)	-2%
6	CASE MIX ADJUSTED DISCHARGES	15,939.71830	14,914.22420	(1,025.49410)	-6%
7	OUTPATIENT CHARGES	\$265,996,923	\$295,101,882	\$29,104,959	11%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	75.15%	81.76%	6.61%	9%
9	OUTPATIENT PAYMENTS	\$83,697,425	\$92,128,908	\$8,431,483	10%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.47%	31.22%	-0.25%	-1%
11	TOTAL CHARGES	\$619,942,571	\$656,016,993	\$36,074,422	6%
12	TOTAL PAYMENTS	\$197,583,937	\$206,890,872	\$9,306,935	5%
13	TOTAL PAYMENTS / CHARGES	31.87%	31.54%	-0.33%	-1%
14	PATIENT DAYS	66,272	64,146	(2,126)	-3%
15	TOTAL GOVERNMENT DEDUCTIONS	\$422,358,634	\$449,126,121	\$26,767,487	6%
C.	<u>AVERAGE LENGTH OF STAY</u>				
1	MEDICARE	5.6	5.6	0.0	0%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.8	3.7	(0.1)	-2%
3	UNINSURED	3.9	3.8	(0.1)	-2%
4	MEDICAID	4.2	4.6	0.4	9%
5	OTHER MEDICAL ASSISTANCE	5.5	4.9	(0.6)	-11%
6	CHAMPUS / TRICARE	2.9	3.0	0.1	5%
7	TOTAL AVERAGE LENGTH OF STAY	4.7	4.7	0.0	0%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
III.	<u>DATA USED IN BASELINE UNDERPAYMENT CALCULATION</u>				
1	TOTAL CHARGES	\$1,113,153,089	\$1,177,078,060	\$63,924,971	6%
2	TOTAL GOVERNMENT DEDUCTIONS	\$422,358,634	\$449,126,121	\$26,767,487	6%
3	UNCOMPENSATED CARE	\$29,542,708	\$33,383,000	\$3,840,292	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$166,071,162	\$171,712,998	\$5,641,836	3%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$14,537,538	\$16,741,033	\$2,203,495	15%
6	TOTAL ADJUSTMENTS	\$632,510,042	\$670,963,152	\$38,453,110	6%
7	TOTAL ACCRUED PAYMENTS	\$480,643,047	\$506,114,908	\$25,471,861	5%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$480,643,047	\$506,114,908	\$25,471,861	5%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4317852160	0.4299756534	(0.0018095626)	0%
11	COST OF UNCOMPENSATED CARE	\$12,756,105	\$14,353,877	\$1,597,773	13%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$24,354,312	\$26,798,928	\$2,444,616	10%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$37,110,416	\$41,152,805	\$4,042,389	11%
IV.	<u>CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</u>				
1	MEDICAID	\$19,074,144	\$18,571,284	(\$502,860)	-3%
2	OTHER MEDICAL ASSISTANCE	\$850,499	\$625,491	(\$225,008)	-26%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,082,027	\$4,700,126	(\$5,381,901)	-53%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$30,006,669	\$23,896,900	(\$6,109,769)	-20%
V.	<u>DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</u>				
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$24,904,012	\$27,997,903	\$3,093,891	12.42%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$16,110,641	\$14,604,664	(\$1,505,977)	-9.35%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$497,720,490	\$521,836,000	\$24,115,510	4.85%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$1,113,153,089	\$1,177,078,060	\$63,924,971	5.74%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$29,542,708	\$33,383,000	\$3,840,292	13.00%

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS			
A.	INPATIENT ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$190,380,782	\$183,085,674	(\$7,295,108)
2	MEDICARE	\$291,864,516	286,880,905	(\$4,983,611)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$61,448,664	73,539,711	\$12,091,047
4	MEDICAID	\$59,876,239	72,740,335	\$12,864,096
5	OTHER MEDICAL ASSISTANCE	\$1,572,425	799,376	(\$773,049)
6	CHAMPUS / TRICARE	\$632,468	494,495	(\$137,973)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,413,243	6,349,011	\$935,768
	TOTAL INPATIENT GOVERNMENT CHARGES	\$353,945,648	\$360,915,111	\$6,969,463
	TOTAL INPATIENT CHARGES	\$544,326,430	\$544,000,785	(\$325,645)
B.	OUTPATIENT ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$302,829,736	\$337,975,393	\$35,145,657
2	MEDICARE	\$198,092,097	221,855,893	\$23,763,796
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$67,208,165	72,258,000	\$5,049,835
4	MEDICAID	\$66,075,838	71,133,372	\$5,057,534
5	OTHER MEDICAL ASSISTANCE	\$1,132,327	1,124,628	(\$7,699)
6	CHAMPUS / TRICARE	\$696,661	987,989	\$291,328
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$22,935,833	30,198,901	\$7,263,068
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$265,996,923	\$295,101,882	\$29,104,959
	TOTAL OUTPATIENT CHARGES	\$568,826,659	\$633,077,275	\$64,250,616
C.	TOTAL ACCRUED CHARGES			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$493,210,518	\$521,061,067	\$27,850,549
2	TOTAL MEDICARE	\$489,956,613	\$508,736,798	\$18,780,185
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$128,656,829	\$145,797,711	\$17,140,882
4	TOTAL MEDICAID	\$125,952,077	\$143,873,707	\$17,921,630
5	TOTAL OTHER MEDICAL ASSISTANCE	\$2,704,752	\$1,924,004	(\$780,748)
6	TOTAL CHAMPUS / TRICARE	\$1,329,129	\$1,482,484	\$153,355
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$28,349,076	\$36,547,912	\$8,198,836
	TOTAL GOVERNMENT CHARGES	\$619,942,571	\$656,016,993	\$36,074,422
	TOTAL CHARGES	\$1,113,153,089	\$1,177,078,060	\$63,924,971
D.	INPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$112,612,777	\$108,067,227	(\$4,545,550)
2	MEDICARE	\$98,949,663	96,248,763	(\$2,700,900)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,737,373	18,354,306	\$3,616,933
4	MEDICAID	\$14,451,349	18,124,266	\$3,672,917
5	OTHER MEDICAL ASSISTANCE	\$286,024	230,040	(\$55,984)
6	CHAMPUS / TRICARE	\$199,476	158,895	(\$40,581)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$613,179	1,343,992	\$730,813
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$113,886,512	\$114,761,964	\$875,452
	TOTAL INPATIENT PAYMENTS	\$226,499,289	\$222,829,191	(\$3,670,098)
E.	OUTPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$171,413,135	\$192,273,237	\$20,860,102
2	MEDICARE	\$67,074,143	74,385,515	\$7,311,372
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$16,460,432	17,536,232	\$1,075,800
4	MEDICAID	\$16,175,876	17,240,567	\$1,064,691
5	OTHER MEDICAL ASSISTANCE	\$284,556	295,665	\$11,109
6	CHAMPUS / TRICARE	\$162,850	207,161	\$44,311
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,598,031	6,392,663	\$3,794,632
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$83,697,425	\$92,128,908	\$8,431,483
	TOTAL OUTPATIENT PAYMENTS	\$255,110,560	\$284,402,145	\$29,291,585
F.	TOTAL ACCRUED PAYMENTS			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$284,025,912	\$300,340,464	\$16,314,552
2	TOTAL MEDICARE	\$166,023,806	\$170,634,278	\$4,610,472
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$31,197,805	\$35,890,538	\$4,692,733
4	TOTAL MEDICAID	\$30,627,225	\$35,364,833	\$4,737,608
5	TOTAL OTHER MEDICAL ASSISTANCE	\$570,580	\$525,705	(\$44,875)
6	TOTAL CHAMPUS / TRICARE	\$362,326	\$366,056	\$3,730
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,211,210	\$7,736,655	\$4,525,445
	TOTAL GOVERNMENT PAYMENTS	\$197,583,937	\$206,890,872	\$9,306,935
	TOTAL PAYMENTS	\$481,609,849	\$507,231,336	\$25,621,487

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
II.	<u>PAYER MIX</u>			
A.	<u>INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	17.10%	15.55%	-1.55%
2	MEDICARE	26.22%	24.37%	-1.85%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.52%	6.25%	0.73%
4	MEDICAID	5.38%	6.18%	0.80%
5	OTHER MEDICAL ASSISTANCE	0.14%	0.07%	-0.07%
6	CHAMPUS / TRICARE	0.06%	0.04%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.49%	0.54%	0.05%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	31.80%	30.66%	-1.13%
	TOTAL INPATIENT PAYER MIX	48.90%	46.22%	-2.68%
B.	<u>OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	27.20%	28.71%	1.51%
2	MEDICARE	17.80%	18.85%	1.05%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.04%	6.14%	0.10%
4	MEDICAID	5.94%	6.04%	0.11%
5	OTHER MEDICAL ASSISTANCE	0.10%	0.10%	-0.01%
6	CHAMPUS / TRICARE	0.06%	0.08%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.06%	2.57%	0.51%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	23.90%	25.07%	1.17%
	TOTAL OUTPATIENT PAYER MIX	51.10%	53.78%	2.68%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	<u>INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	23.38%	21.31%	-2.08%
2	MEDICARE	20.55%	18.98%	-1.57%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.06%	3.62%	0.56%
4	MEDICAID	3.00%	3.57%	0.57%
5	OTHER MEDICAL ASSISTANCE	0.06%	0.05%	-0.01%
6	CHAMPUS / TRICARE	0.04%	0.03%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.13%	0.26%	0.14%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	23.65%	22.63%	-1.02%
	TOTAL INPATIENT PAYER MIX	47.03%	43.93%	-3.10%
D.	<u>OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	35.59%	37.91%	2.31%
2	MEDICARE	13.93%	14.67%	0.74%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.42%	3.46%	0.04%
4	MEDICAID	3.36%	3.40%	0.04%
5	OTHER MEDICAL ASSISTANCE	0.06%	0.06%	0.00%
6	CHAMPUS / TRICARE	0.03%	0.04%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.54%	1.26%	0.72%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	17.38%	18.16%	0.78%
	TOTAL OUTPATIENT PAYER MIX	52.97%	56.07%	3.10%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA			
A.	DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,068	7,521	(547)
2	MEDICARE	9,495	8,736	(759)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,166	3,377	211
4	MEDICAID	3,069	3,326	257
5	OTHER MEDICAL ASSISTANCE	97	51	(46)
6	CHAMPUS / TRICARE	34	34	-
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	248	197	(51)
	TOTAL GOVERNMENT DISCHARGES	12,695	12,147	(548)
	TOTAL DISCHARGES	20,763	19,668	(1,095)
B.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	30,391	27,864	(2,527)
2	MEDICARE	52,749	48,594	(4,155)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13,426	15,450	2,024
4	MEDICAID	12,889	15,198	2,309
5	OTHER MEDICAL ASSISTANCE	537	252	(285)
6	CHAMPUS / TRICARE	97	102	5
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	960	751	(209)
	TOTAL GOVERNMENT PATIENT DAYS	66,272	64,146	(2,126)
	TOTAL PATIENT DAYS	96,663	92,010	(4,653)
C.	AVERAGE LENGTH OF STAY (ALOS)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.8	3.7	(0.1)
2	MEDICARE	5.6	5.6	0.0
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.2	4.6	0.3
4	MEDICAID	4.2	4.6	0.4
5	OTHER MEDICAL ASSISTANCE	5.5	4.9	(0.6)
6	CHAMPUS / TRICARE	2.9	3.0	0.1
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.9	3.8	(0.1)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.2	5.3	0.1
	TOTAL AVERAGE LENGTH OF STAY	4.7	4.7	0.0
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.19520	1.21120	0.01600
2	MEDICARE	1.33280	1.32110	(0.01170)
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.02784	0.98915	(0.03868)
4	MEDICAID	1.03140	0.99130	(0.04010)
5	OTHER MEDICAL ASSISTANCE	0.91510	0.84920	(0.06590)
6	CHAMPUS / TRICARE	0.90150	0.96240	0.06090
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.21530	1.29020	0.07490
	TOTAL GOVERNMENT CASE MIX INDEX	1.25559	1.22781	(0.02778)
	TOTAL CASE MIX INDEX	1.23212	1.22146	(0.01066)
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$440,484,262	\$457,174,326	\$16,690,064
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$274,413,100	\$285,461,328	\$11,048,228
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$166,071,162	\$171,712,998	\$5,641,836
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	37.70%	37.56%	-0.14%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$24,904,012	\$27,997,903	\$3,093,891
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$14,537,538	\$16,741,033	\$2,203,495
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$11,359,623	\$13,969,782	\$2,610,159
9	BAD DEBTS	\$18,183,085	\$19,413,218	\$1,230,133
10	TOTAL UNCOMPENSATED CARE	\$29,542,708	\$33,383,000	\$3,840,292
11	TOTAL OTHER OPERATING REVENUE	\$440,484,262	\$457,174,326	\$16,690,064
12	TOTAL OPERATING EXPENSES	\$495,471,968	\$514,797,196	\$19,325,228

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9,642.87360	9,109.43520	(533.43840)
2	MEDICARE	12,654.93600	11,541.12960	(1,113.80640)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,254.13130	3,340.37300	86.24170
4	MEDICAID	3,165.36660	3,297.06380	131.69720
5	OTHER MEDICAL ASSISTANCE	88.76470	43.30920	(45.45550)
6	CHAMPUS / TRICARE	30.65100	32.72160	2.07060
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	301.39440	254.16940	(47.22500)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	15,939.71830	14,914.22420	(1,025.49410)
	TOTAL CASE MIX ADJUSTED DISCHARGES	25,582.59190	24,023.65940	(1,558.93250)
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	12,833.38730	13,883.73473	1,050.34743
2	MEDICARE	6,444.37524	6,755.88039	311.50515
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,456.61610	3,324.27376	-132.34234
4	MEDICAID	3,386.76494	3,252.52276	-134.24218
5	OTHER MEDICAL ASSISTANCE	69.85117	71.75100	1.89984
6	CHAMPUS / TRICARE	37.45087	67.93117	30.48031
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,050.77245	937.02523	-113.74721
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	9,938.44221	10,148.08533	209.64312
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	22,771.82951	24,031.82006	1,259.99055
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,678.34	\$11,863.22	\$184.88
2	MEDICARE	\$7,819.06	\$8,339.63	\$520.57
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,528.82	\$5,494.69	\$965.87
4	MEDICAID	\$4,565.46	\$5,497.09	\$931.63
5	OTHER MEDICAL ASSISTANCE	\$3,222.27	\$5,311.57	\$2,089.30
6	CHAMPUS / TRICARE	\$6,507.98	\$4,855.97	(\$1,652.01)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,034.47	\$5,287.78	\$3,253.31
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,144.83	\$7,694.80	\$549.97
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,853.65	\$9,275.41	\$421.76
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,356.81	\$13,848.81	\$492.00
2	MEDICARE	\$10,408.17	\$11,010.48	\$602.32
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,762.01	\$5,275.21	\$513.20
4	MEDICAID	\$4,776.20	\$5,300.68	\$524.47
5	OTHER MEDICAL ASSISTANCE	\$4,073.75	\$4,120.71	\$46.96
6	CHAMPUS / TRICARE	\$4,348.36	\$3,049.57	(\$1,298.79)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,472.50	\$6,822.30	\$4,349.80
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$8,421.58	\$9,078.45	\$656.87
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$11,202.90	\$11,834.40	\$631.50

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
1	MEDICAID	\$19,074,144	\$18,571,284	(\$502,860)
2	OTHER MEDICAL ASSISTANCE	\$850,499	\$625,491	(\$225,008)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,082,027	\$4,700,126	(\$5,381,901)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$30,006,669	\$23,896,900	(\$6,109,769)
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)			
1	TOTAL CHARGES	\$1,113,153,089	\$1,177,078,060	\$63,924,971
2	TOTAL GOVERNMENT DEDUCTIONS	\$422,358,634	\$449,126,121	\$26,767,487
3	UNCOMPENSATED CARE	\$29,542,708	\$33,383,000	\$3,840,292
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$166,071,162	\$171,712,998	\$5,641,836
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$14,537,538	\$16,741,033	\$2,203,495
6	TOTAL ADJUSTMENTS	\$632,510,042	\$670,963,152	\$38,453,110
7	TOTAL ACCRUED PAYMENTS	\$480,643,047	\$506,114,908	\$25,471,861
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$480,643,047	\$506,114,908	\$25,471,861
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4317852160	0.4299756534	(0.0018095626)
11	COST OF UNCOMPENSATED CARE	\$12,756,105	\$14,353,877	\$1,597,773
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$24,354,312	\$26,798,928	\$2,444,616
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$37,110,416	\$41,152,805	\$4,042,389
VII.	RATIOS			
A.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	59.15%	59.03%	-0.13%
2	MEDICARE	33.90%	33.55%	-0.35%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.98%	24.96%	0.98%
4	MEDICAID	24.14%	24.92%	0.78%
5	OTHER MEDICAL ASSISTANCE	18.19%	28.78%	10.59%
6	CHAMPUS / TRICARE	31.54%	32.13%	0.59%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	11.33%	21.17%	9.84%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	32.18%	31.80%	-0.38%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	41.61%	40.96%	-0.65%
B.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	56.60%	56.89%	0.29%
2	MEDICARE	33.86%	33.53%	-0.33%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	24.49%	24.27%	-0.22%
4	MEDICAID	24.48%	24.24%	-0.24%
5	OTHER MEDICAL ASSISTANCE	25.13%	26.29%	1.16%
6	CHAMPUS / TRICARE	23.38%	20.97%	-2.41%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	11.33%	21.17%	9.84%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	31.47%	31.22%	-0.25%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	44.85%	44.92%	0.08%

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$481,609,849	\$507,231,336	\$25,621,487
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$481,609,849	\$507,231,336	\$25,621,487
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$16,110,641	\$14,604,664	(\$1,505,977)
4	CALCULATED NET REVENUE	\$497,720,490	\$521,836,000	\$24,115,510
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$497,720,490	\$521,836,000	\$24,115,510
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$1,113,153,089	\$1,177,078,060	\$63,924,971
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$1,113,153,089	\$1,177,078,060	\$63,924,971
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,113,153,089	\$1,177,078,060	\$63,924,971
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$29,542,708	\$33,383,000	\$3,840,292
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$29,542,708	\$33,383,000	\$3,840,292
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$29,542,708	\$33,383,000	\$3,840,292
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

DANBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
I.	ACCRUED CHARGES AND PAYMENTS	
A.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$183,085,674
2	MEDICARE	286,880,905
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	73,539,711
4	MEDICAID	72,740,335
5	OTHER MEDICAL ASSISTANCE	799,376
6	CHAMPUS / TRICARE	494,495
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6,349,011
	TOTAL INPATIENT GOVERNMENT CHARGES	\$360,915,111
	TOTAL INPATIENT CHARGES	\$544,000,785
B.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$337,975,393
2	MEDICARE	221,855,893
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	72,258,000
4	MEDICAID	71,133,372
5	OTHER MEDICAL ASSISTANCE	1,124,628
6	CHAMPUS / TRICARE	987,989
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	30,198,901
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$295,101,882
	TOTAL OUTPATIENT CHARGES	\$633,077,275
C.	TOTAL ACCRUED CHARGES	
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$521,061,067
2	TOTAL GOVERNMENT ACCRUED CHARGES	656,016,993
	TOTAL ACCRUED CHARGES	\$1,177,078,060
D.	INPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$108,067,227
2	MEDICARE	96,248,763
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	18,354,306
4	MEDICAID	18,124,266
5	OTHER MEDICAL ASSISTANCE	230,040
6	CHAMPUS / TRICARE	158,895
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,343,992
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$114,761,964
	TOTAL INPATIENT PAYMENTS	\$222,829,191
E.	OUTPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$192,273,237
2	MEDICARE	74,385,515
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17,536,232
4	MEDICAID	17,240,567
5	OTHER MEDICAL ASSISTANCE	295,665
6	CHAMPUS / TRICARE	207,161
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6,392,663
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$92,128,908
	TOTAL OUTPATIENT PAYMENTS	\$284,402,145
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$300,340,464
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	206,890,872
	TOTAL ACCRUED PAYMENTS	\$507,231,336

DANBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
A.	ACCRUED DISCHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7,521
2	MEDICARE	8,736
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,377
4	MEDICAID	3,326
5	OTHER MEDICAL ASSISTANCE	51
6	CHAMPUS / TRICARE	34
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	197
	TOTAL GOVERNMENT DISCHARGES	12,147
	TOTAL DISCHARGES	19,668
B.	CASE MIX INDEX	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.21120
2	MEDICARE	1.32110
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.98915
4	MEDICAID	0.99130
5	OTHER MEDICAL ASSISTANCE	0.84920
6	CHAMPUS / TRICARE	0.96240
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.29020
	TOTAL GOVERNMENT CASE MIX INDEX	1.22781
	TOTAL CASE MIX INDEX	1.22146
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$457,174,326
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$285,461,328
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$171,712,998
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	37.56%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$27,997,903
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$16,741,033
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$13,969,782
9	BAD DEBTS	\$19,413,218
10	TOTAL UNCOMPENSATED CARE	\$33,383,000
11	TOTAL OTHER OPERATING REVENUE	\$19,598,257
12	TOTAL OPERATING EXPENSES	\$514,797,196

DANBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	TOTAL ACCRUED PAYMENTS	\$507,231,336
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$507,231,336
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$14,604,664
	CALCULATED NET REVENUE	\$521,836,000
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$521,836,000
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$1,177,078,060
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$1,177,078,060
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,177,078,060
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$33,383,000
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$33,383,000
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$33,383,000
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A.	<u>Hospital Charity Care (from HRS Report 500)</u>				
1	Number of Applicants	3,738	3,442	(296)	-8%
2	Number of Approved Applicants	3,625	3,312	(313)	-9%
3	Total Charges (A)	\$11,359,623	\$13,969,782	\$2,610,159	23%
4	Average Charges	\$3,134	\$4,218	\$1,084	35%
5	Ratio of Cost to Charges (RCC)	0.438257	0.440437	0.002180	0%
6	Total Cost	\$4,978,434	\$6,152,809	\$1,174,375	24%
7	Average Cost	\$1,373	\$1,858	\$484	35%
8	Charity Care - Inpatient Charges	\$2,043,598	\$2,742,952	\$699,354	34%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	2,362,328	2,451,344	89,016	4%
10	Charity Care - Emergency Department Charges	6,953,697	8,775,486	1,821,789	26%
11	Total Charges (A)	\$11,359,623	\$13,969,782	\$2,610,159	23%
12	Charity Care - Number of Patient Days	611	879	268	44%
13	Charity Care - Number of Discharges	149	212	63	42%
14	Charity Care - Number of Outpatient ED Visits	1,968	1,756	(212)	-11%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	11,172	12,698	1,526	14%
B.	<u>Hospital Bad Debts (from HRS Report 500)</u>				
1	Bad Debts - Inpatient Services	\$4,398,990	\$4,247,629	(\$151,361)	-3%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	11,296,531	12,657,070	1,360,539	12%
3	Bad Debts - Emergency Department	2,487,564	2,508,519	20,955	1%
4	Total Bad Debts (A)	\$18,183,085	\$19,413,218	\$1,230,133	7%
C.	<u>Hospital Uncompensated Care (from HRS Report 500)</u>				
1	Charity Care (A)	\$11,359,623	\$13,969,782	\$2,610,159	23%
2	Bad Debts (A)	18,183,085	19,413,218	1,230,133	7%
3	Total Uncompensated Care (A)	\$29,542,708	\$33,383,000	\$3,840,292	13%
4	Uncompensated Care - Inpatient Services	\$6,442,588	\$6,990,581	\$547,993	9%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	13,658,859	15,108,414	1,449,555	11%
6	Uncompensated Care - Emergency Department	9,441,261	11,284,005	1,842,744	20%
7	Total Uncompensated Care (A)	\$29,542,708	\$33,383,000	\$3,840,292	13%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES,					
ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012		
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	<u>COMMERCIAL - ALL PAYERS</u>				
1	Total Gross Revenue	\$440,484,262	\$457,174,326	\$16,690,064	4%
2	Total Contractual Allowances	\$166,071,162	\$171,712,998	\$5,641,836	3%
	Total Accrued Payments (A)	\$274,413,100	\$285,461,328	\$11,048,228	4%
	Total Discount Percentage	37.70%	37.56%	-0.14%	0%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
A.	<u>Gross and Net Revenue</u>			
1	Inpatient Gross Revenue	\$512,924,104	\$544,326,430	\$544,000,785
2	Outpatient Gross Revenue	\$529,890,812	\$568,826,659	\$633,077,275
3	Total Gross Patient Revenue	\$1,042,814,916	\$1,113,153,089	\$1,177,078,060
4	Net Patient Revenue	\$471,020,724	\$497,720,490	\$521,836,000
B.	<u>Total Operating Expenses</u>			
1	Total Operating Expense	\$460,314,702	\$495,471,968	\$514,797,196
C.	<u>Utilization Statistics</u>			
1	Patient Days	95,884	96,663	92,010
2	Discharges	20,715	20,763	19,668
3	Average Length of Stay	4.6	4.7	4.7
4	Equivalent (Adjusted) Patient Days (EPD)	194,940	197,677	199,086
0	Equivalent (Adjusted) Discharges (ED)	42,115	42,461	42,557
D.	<u>Case Mix Statistics</u>			
1	Case Mix Index	1.20108	1.23212	1.22146
2	Case Mix Adjusted Patient Days (CMAPD)	115,164	119,101	112,386
3	Case Mix Adjusted Discharges (CMAD)	24,880	25,583	24,024
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	234,138	243,562	243,175
5	Case Mix Adjusted Equivalent Discharges (CMAED)	50,584	52,317	51,981
E.	<u>Gross Revenue Per Statistic</u>			
1	Total Gross Revenue per Patient Day	\$10,876	\$11,516	\$12,793
2	Total Gross Revenue per Discharge	\$50,341	\$53,612	\$59,847
3	Total Gross Revenue per EPD	\$5,349	\$5,631	\$5,912
4	Total Gross Revenue per ED	\$24,761	\$26,216	\$27,659
5	Total Gross Revenue per CMAEPD	\$4,454	\$4,570	\$4,840
6	Total Gross Revenue per CMAED	\$20,616	\$21,277	\$22,644
7	Inpatient Gross Revenue per EPD	\$2,631	\$2,754	\$2,732
8	Inpatient Gross Revenue per ED	\$12,179	\$12,820	\$12,783

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2010</u>	<u>ACTUAL FY 2011</u>	<u>ACTUAL FY 2012</u>
F.	<u>Net Revenue Per Statistic</u>			
1	Net Patient Revenue per Patient Day	\$4,912	\$5,149	\$5,672
2	Net Patient Revenue per Discharge	\$22,738	\$23,972	\$26,532
3	Net Patient Revenue per EPD	\$2,416	\$2,518	\$2,621
4	Net Patient Revenue per ED	\$11,184	\$11,722	\$12,262
5	Net Patient Revenue per CMAEPD	\$2,012	\$2,044	\$2,146
6	Net Patient Revenue per CMAED	\$9,312	\$9,514	\$10,039
G.	<u>Operating Expense Per Statistic</u>			
1	Total Operating Expense per Patient Day	\$4,801	\$5,126	\$5,595
2	Total Operating Expense per Discharge	\$22,221	\$23,863	\$26,174
3	Total Operating Expense per EPD	\$2,361	\$2,506	\$2,586
4	Total Operating Expense per ED	\$10,930	\$11,669	\$12,097
5	Total Operating Expense per CMAEPD	\$1,966	\$2,034	\$2,117
6	Total Operating Expense per CMAED	\$9,100	\$9,471	\$9,904
H.	<u>Nursing Salary and Fringe Benefits Expense</u>			
1	Nursing Salary Expense	\$54,797,841	\$58,301,687	\$51,198,252
2	Nursing Fringe Benefits Expense	\$18,746,472	\$20,247,827	\$17,759,434
3	Total Nursing Salary and Fringe Benefits Expense	\$73,544,313	\$78,549,514	\$68,957,686
I.	<u>Physician Salary and Fringe Expense</u>			
1	Physician Salary Expense	\$6,365,059	\$7,419,911	\$7,349,665
2	Physician Fringe Benefits Expense	\$2,177,502	\$2,576,891	\$2,523,856
3	Total Physician Salary and Fringe Benefits Expense	\$8,542,561	\$9,996,802	\$9,873,521
J.	<u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u>			
1	Non-Nursing, Non-Physician Salary Expense	\$125,010,388	\$128,541,073	\$132,952,743
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$42,766,350	\$44,641,545	\$45,843,656
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$167,776,738	\$173,182,618	\$178,796,399
K.	<u>Total Salary and Fringe Benefits Expense</u>			
1	Total Salary Expense	\$186,173,288	\$194,262,671	\$191,500,660
2	Total Fringe Benefits Expense	\$63,690,324	\$67,466,263	\$66,126,946
3	Total Salary and Fringe Benefits Expense	\$249,863,612	\$261,728,934	\$257,627,606

DANBURY HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2010</u>	<u>ACTUAL FY 2011</u>	<u>ACTUAL FY 2012</u>
L.	<u>Total Full Time Equivalent Employees (FTEs)</u>			
1	Total Nursing FTEs	564.3	572.3	567.8
2	Total Physician FTEs	87.4	97.8	101.5
3	Total Non-Nursing, Non-Physician FTEs	1841.1	1871.2	1734.6
4	Total Full Time Equivalent Employees (FTEs)	2,492.8	2,541.3	2,403.9
M.	<u>Nursing Salaries and Fringe Benefits Expense per FTE</u>			
1	Nursing Salary Expense per FTE	\$97,108	\$101,873	\$90,170
2	Nursing Fringe Benefits Expense per FTE	\$33,221	\$35,380	\$31,278
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$130,328	\$137,252	\$121,447
N.	<u>Physician Salary and Fringe Expense per FTE</u>			
1	Physician Salary Expense per FTE	\$72,827	\$75,868	\$72,410
2	Physician Fringe Benefits Expense per FTE	\$24,914	\$26,349	\$24,866
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$97,741	\$102,217	\$97,276
O.	<u>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</u>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$67,900	\$68,694	\$76,647
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$23,229	\$23,857	\$26,429
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$91,129	\$92,552	\$103,076
P.	<u>Total Salary and Fringe Benefits Expense per FTE</u>			
1	Total Salary Expense per FTE	\$74,684	\$76,442	\$79,662
2	Total Fringe Benefits Expense per FTE	\$25,550	\$26,548	\$27,508
3	Total Salary and Fringe Benefits Expense per FTE	\$100,234	\$102,990	\$107,171
Q.	<u>Total Salary and Fringe Ben. Expense per Statistic</u>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,606	\$2,708	\$2,800
2	Total Salary and Fringe Benefits Expense per Discharge	\$12,062	\$12,606	\$13,099
3	Total Salary and Fringe Benefits Expense per EPD	\$1,282	\$1,324	\$1,294
4	Total Salary and Fringe Benefits Expense per ED	\$5,933	\$6,164	\$6,054
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,067	\$1,075	\$1,059
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,940	\$5,003	\$4,956